

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 FEB 25 PM 4:16

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000110576

1. Corporation Name

Florida Mortgage Funding Corp

**REINSTATEMENT 03-04**

2. Principal Office Address

18499 Cutlass DR

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Fort Myers Beach

City & State

SAME

Zip

33931

Country

U.S.A.

Zip

same

Country

same

4. Date Incorporated or Qualified  
To Do Business in Florida

10-11-2002

5. FEI Number

134228463

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

KENNETH W. BAKER

Street Address (P.O. Box Number is Not Acceptable)

18324 Deep Passage

Suite, Apt. #, Etc.

City

Fort Myers Beach

State

FL

Zip Code

33931

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Kenny Baker

REGISTERED AGENT MUST SIGN

Date 2-19-2004

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
<u>Pres.</u>	<u>KENNETH W. Baker</u>	<u>18499 Cutlass DR.</u>	<u>Fort Myers Beach FL 33931</u>

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Kenny Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-2004 239-289-3524

Date

Daytime Phone #

CR2001 (01/04)

# Florida Mortgage Funding Corp

2-19-2004

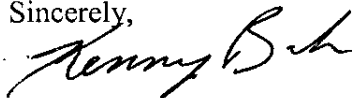
To Whom It May Concern:

Reference: Waiver of reinstatement fee

This letter is to explain why I did not file the corporation's annual report, As well as to ask for a waiver of the reinstatement fee. I used a company to incorporate and they used the wrong address for the company. I am new to Florida and did not realize I had to file annual reports. I never received any mail or documentation in regard to filing the annual report. I ask for the State to waive the reinstatement fee. Attached you will find the reinstatement form that indicates the correct registered agent address so that this does not happen in the future.

Thank you very much in advance for your help.

Sincerely,



Kenny Baker

President

Florida Mortgage Funding Corp

18499 Cutlass Dr.

Fort Myers Beach, FL. 33931

239-289-3524 Cell

239-466-9200 Office

239-466-9210 Fax