

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000156194

FILED
Jun 23, 2005
Secretary of State

Entity Name: CAPITAL MORTGAGE ACCEPTANCE CORPORATION

Current Principal Place of Business:

1424 COLLINS AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1424 COLLINS AVENUE
MIAMI BEACH, FL 33139

New Mailing Address:

5594 BACKLICK RD.
2ND FLOOR
SPRINGFIELD, VA 22151

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID ROBBINS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STEVENS, JULIAN M
Address: 1424 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEVENS, JULIAN
Address: 1424 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Change (X) Addition
Name: OREHOWSKY, SUSAN
Address: 5594 BACKLICK RD.
City-St-Zip: SPRINGFIELD, VA 22151

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN OREHOWSKY

D

06/23/2005

Electronic Signature of Signing Officer or Director

Date