

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000055600**

1. Corporation Name

FIRST TITLE OF AMERICA, INC.

97 NOV 20 PM 12:30

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

**740 GRANT AVENUE
DELAND FL 32724**

Mailing Address

**740 GRANT AVENUE
DELAND FL 32724**



REINSTATEMENT

9700

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

151 S. Wymore Road, Ste. 575

Suite, Apt. #, etc.

Altamonte Springs,

City & State

Florida

Zip

32714

Country

USA

3. New Mailing Office Address, If Applicable

151 S. Wymore Road, Ste 575

Suite, Apt. #, etc.

Altamonte Springs

City & State

Florida

Zip

32714

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/01/1996

5. FEI Number

593389706

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	NAPOLITANO, BRUCE	740 GRANT AVENUE	DELAND FL 32724
P/D	Napolitano, Bruce	810 Alex Lane	Deltona, Florida 32738
S/T/D	Richter, Kent	222 Magnolia Circle	Eustis, Florida 32726

**300002356603--4
-11/25/97--01044--006
****750.00--****750.00**

8. Name and Address of Current Registered Agent

**NAPOLITANO, BRUCE
740 GRANT AVENUE
DELAND FL 32724**

9. Name and Address of New Registered Agent

Name

Napolitano, Bruce

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

810 Alex Lane

Suite, Apt. #, Etc.

City

Deltona,

State
FL

Zip Code
32738

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Bruce Napolitano
REGISTERED AGENT MUST SIGN

Date **11-6-97**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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:

Bruce Napolitano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-6-97
Date

907 257 8122
Daytime Phone #