

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

①

**APPLICATION  
FOR  
REINSTATEMENT**



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

1997 OCT 27 PM 3: 52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P96000097915**

1. Corporation Name  
**FIRST REALTY MORTGAGE CORP.**

Principal Place of Business  
**10400 GRIFFIN ROAD, SUITE 108  
COOPER CITY FL 33328**

Mailing Address  
**10400 GRIFFIN ROAD, SUITE 108  
COOPER CITY FL 33328**



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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida <b>11/27/1996</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
Zip	Country	Zip	Country		

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	NELSON, NANCY L	10400 GRIFFIN ROAD, SUITE 108	COOPER CITY FL 33328

4000002333194--1  
-10/29/97--01116--018  
\*\*\*\*165.00 \*\*\*\*165.00

*Handwritten signature and date 10/23/97*

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

**9. Name and Address of New Registered Agent**

**NELSON, NANCY L  
10400 GRIFFIN ROAD, SUITE 108  
COOPER CITY FL 33328**

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State <b>FL</b> Zip Code

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 *[Signature]* **REGISTERED AGENT MUST SIGN** Date **10-23-97**

**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:** *[Signature]* **10-23-97 954-434-6844**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRCE040 (8/97)

(2)

FIRST REALTY MORTGAGE CORP.  
10400 GRIFFIN ROAD, SUITE 108  
COOPER CITY, FL 33328  
PHONE (954) 434-6844 FAX (954) 434-6044

October 23, 1997

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

RE: Doc. #P96000097915

To Whom It May Concern:

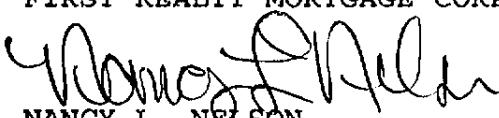
Per my conversation with your office this morning, we did not receive the first notice for filing due to the post office returning it as being not able to deliver.

Enclosed please find our check for \$165.00.

Thank you for your help in this matter.

Sincerely,

FIRST REALTY MORTGAGE CORP.

  
NANCY L. NELSON  
PRESIDENT

Encl.

Licensed Mortgage Brokerage Business