

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

00 AUG -4 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000098665

1. Corporation Name

FINANCIAL VENTURES, INC.

Principal Place of Business

1085 TAMARIND WAY S.W.
BOCA RATON FL 33486

Mailing Address

1085 TAMARIND WAY S.W.
BOCA RATON FL 33486



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.
270 N.W. 3rd Court
City & State
BOCA RATON, FL
Zip
33432 Country
U.S.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
270 N.W. 3rd Court
City & State
BOCA RATON, FL
Zip
33432 Country
U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

12/04/1996

5. FEI Number

65-0714837

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
PD	DEWEES, LEDYARD H	1085 TAMARIND WAY S.W.	BOCA RATON FL
		270 N.W. 3rd Court	BOCA RATON, FL 33432
			8000003388368--3
			-08/23/00--01025--029
			***1058.75 ***1058.75
			REINSTATEMENT 8-00

8. Name and Address of Current Registered Agent

DEWEES, LEDYARD H
1085 TAMARIND WAY S.W.
BOCA RATON FL 33486

9. Name and Address of New Registered Agent

Name

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

270 N.W. 3rd Court

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33432

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 REQUIRED
LEDYARD H. DEWEES

REGISTERED AGENT MUST SIGN

Date

Aug. 1, 2000

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 REQUIRED
LEDYARD H. DEWEES

Aug. 1, 2000

Date

561-368-1427

Daytime Phone #