

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 28 PM 5:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000028988

1. Corporation Name

WHITE EAGLE FINANCIAL CORP.

Principal Place of Business

Mailing Address

21707 SAN SIMEON CIRCLE  
BOCA RATON FL 33433

21707 SAN SIMEON CIRCLE  
BOCA RATON FL 33433

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/28/1997

5. FEI Number

65-0748020

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 3	City / State / Zip 4
PRES	DUFFY, KEITH	21707 SAN SIMEON CIRCLE	BOCA RATON FL 33433

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DUFFY, KEITH F  
21707 SAN SIMEON CIRCLE  
BOCA RATON FL 33433

Name

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

Suite, Apt. #, Etc.

City

State  
FL

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/02)

242

**Keith F. Duffy**  
**21707 San Simeon Circle**  
**Boca Raton, FL 33433**  
**(561) 394-0376**

October 24, 2002

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: White Eagle Financial Corp. FEI# 65-0748020

Dear Sir/Madam:

I just received a Notice of Administrative Dissolution or Revocation in the mail. I was completely shocked since I had not received a request to submit a report previously. I am sure that it is my responsibility to look for it, but when you have a lot going on you may not remember. Since our neighborhood has had mail stolen by delinquents, maybe it was taken. I have never had an issue with filing in the past. Once I received the request, I would send it to my accountant who took care of everything.

Although this company has been basically inactive for years, I would like to keep it if possible. I would very much appreciate being aloud to pay the \$150 activation fee. I have enclosed a check for \$150. I am sorry for any inconvenience that I have caused your office.

Thank you for your consideration.

Sincerely,



Keith Duffy