

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S02188

FILED
Oct 27, 2008
Secretary of State

Entity Name: THE MORTGAGE CENTER OF VOLUSIA COUNTY, INC.

Current Principal Place of Business:

140 S. ATLANTIC AVE.
303
ORMOND BEACH, FL 32176

New Principal Place of Business:

140 S. ATLANTIC AVE.
500
ORMOND BEACH, FL 32176

Current Mailing Address:

140 S. ATLANTIC AVE.
303
ORMOND BEACH, FL 32176

New Mailing Address:

140 S. ATLANTIC AVE.
500
ORMOND BEACH, FL 32176

FEI Number: 59-3029025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TACINELLI, MICHAEL
140 S. ATLANTIC AVE.
303
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

TACINELLI, MICHAEL
140 S. ATLANTIC AVE.
500
ORMOND BEACH, FL 32176 US

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: MICHAEL TACINELLI

10/27/2008

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: P () Delete
Name: TACINELLI, MICHAEL
Address: 28 DOMICILIO AVE
City-St-Zip: ORMOND BCH, FL 32174

Title: VP () Delete
Name: TACINELLI, DIANE
Address: 28 DOMICILIO AVE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL TACINELLI

PRES

10/27/2008

Electronic Signature of Signing Officer or Director

Date