

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 APR 24 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 552326

1. Corporation Name

Amerifirst Development Corporation

Principal Place of Business
1910 Pacific Ave.
Suite 1600
Dallas, TX 75201

Mailing Address
1910 Pacific Ave.
Suite 1600
Dallas, TX 75201

600003248996--9
-05/11/00--01099--013
***300.00 ***300.00

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

December 1, 1977

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-1795016

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

\$9.75 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)

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/P	Mel Yarbrough	1910 Pacific Ave., #1600	Dallas, TX 75201
D/V	Daniel M. Bell	1910 Pacific Ave., #1600	Dallas, TX 75201
D/V	Randy A. Just	1910 Pacific Ave., #1600	Dallas, TX 75201
D/S/T	William J. Thomas, III	1910 Pacific Ave., #1600	Dallas, TX 75201
V	James Vordtriede	1910 Pacific Ave., #1600	Dallas, TX 75201
V	David B. Cantos	1910 Pacific Ave., #1600	Dallas, TX 75201

8. Name and Address of Current Registered Agent

CT Corporation Systems
1200 South Pine Island Road
Plantation, FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (Post Office Box Number, if applicable)

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

C. Morata
Special Asst. Secretary

REGISTERED AGENT MUST SIGN

Date

4-13-00

11. This corporation owes 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: Mel Yarbrough, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-00

Date

972-761-8044

Daytime Phone #

CR2E081 (12/98)