

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 JAN 22 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000001617

1. Corporation Name

NATIONAL NEW HOMES CO., INC.

Principal Place of Business

17120 NORTH DALLAS PARKWAY, SUITE 175
DALLAS TX 75248

Mailing Address

17120 NORTH DALLAS PARKWAY, SUITE 175
DALLAS TX 75248

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.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/23/2000

5. FEI Number

95-4694882

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT

0102

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
CD	WOLFF, STUART H PH.D.	225 WEST HILLCREST DRIVE, SUITE 30700 Russell Ranch Rd.	THOUSAND OAKS CA 91380 Westlake Village, CA 91362
COO	William H Brown	225 WEST HILLCREST DRIVE, SUITE 30700 Russell Ranch Rd.	THOUSAND OAKS CA 91380 Westlake Village, CA 91362
VSD	GIESECKE, JOHN M JR.	225 WEST HILLCREST DRIVE, SUITE 30700 Russell Ranch Rd.	THOUSAND OAKS CA 91380 Westlake Village, CA 91362
VS	Walter Lowry	225 WEST HILLCREST DRIVE, SUITE 30700 Russell Ranch Rd.	THOUSAND OAKS CA 91380 Westlake Village, CA 91362
P	Allan P. Merrill	225 WEST HILLCREST DRIVE, SUITE 30700 Russell Ranch Rd.	THOUSAND OAKS CA 91380 Westlake Village, CA 91362

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8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

01/30/02-01053-002

***150.00 ***150.00

000004844690--0

-01/30/02-01053-003

****750.00 State ****750.00

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

Laura R. Dunlap
as its agent

REGISTERED AGENT MUST SIGN

Date

1/21/02

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 #

12/20/01 (805) 557-3800

CR2E040 (8/01)