

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # F93000000178

1. Corporation Name

Residential Equities, LTD., Corporation

Principal Place of Business

Mailing Address

875 N. MICHIGAN, SUITE 3335  
CHICAGO, IL 60611

SAME  
SAME

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

1/14/93

5. FEI Number

36-3045806

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	Peter Morris	875 N. Michigan, #3335	Chicago, IL 60611
VP	Peter Morris	875 N. Michigan, #3335	Chicago, IL 60611
Sec	Peter Morris	875 N. Michigan, #3335	Chicago, IL 60611
Treas	Peter Morris	875 N. Michigan, #3335	Chicago, IL 60611
Dir	Peter Morris	875 N. Michigan, #3335	Chicago, IL 60611
			800002496698--0

8. Name and Address of Current Registered Agent

The Prentice-Hall Corporation System,  
1201 Hays  
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

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.

Signature of  
Registered Agent

Carol K. De...  
REGISTERED AGENT MUST SIGN

Date 4-21-98

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
98 APR 22 PM 1:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT

97-980  
42240

CR2E040 (1/98)



ACCOUNT NO. : 072100000032

REFERENCE : 788784 4377733

AUTHORIZATION :

COST LIMIT : \$ 900.00

*Patricia Pignatelli*

ORDER DATE : April 20, 1998

ORDER TIME : 12:49 PM

ORDER NO. : 788784-005

CUSTOMER NO: 4377733

CUSTOMER: Mr. Paul Lukitsch  
PRIME RESIDENTIAL MANAGEMENT

Suite 3335  
875 North Michigan Avenue  
Chicago, IL 60611

DOMESTIC FILING

NAME: RESIDENTIAL EQUITIES, LTD.

EFFECTIVE DATE:

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stacy L Earnest

EXAMINER'S INITIALS:

RECEIVED  
98 APR 22 PM 1:08  
DIVISION OF CORPORATION