

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

99 DEC -6 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000003704

1. Corporation Name

ACRON KAPITAL UND IMMOBILIEN GMBH

Principal Place of Business

Mailing Address

2911 TURTLE CREEK BLVD-
SUITE 800-
DALLAS TX 75219-

2911 TURTLE CREEK BLVD-
SUITE 800-
DALLAS TX 75219-

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
1516 S. Boston,

3. New Mailing Office Address, If Applicable
1516 S. Boston Ave.

Suite, Apt. #, etc.
Suite 215

Suite, Apt. #, etc.
Suite 215

City & State
Tulsa, OK

City & State
Tulsa, OK

Zip
74119

Country
USA

Zip
74119

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/01/1995

5. FEI Number

75-2405435

Applied For

Not Applicable

8. 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	4 City / State / Zip
GEO	SOHNITZER, KLAUS-MICHAEL	MORSENBROICHER WEG 200	D-40470 DUSSELDORF GERMANY
D	STURM, HEINRICH	MORSENBROICHER WEG 200	D-40470 DUSSELDORF GERMANY
PAS PS	WILSON, GREG Wilson, Greg	15 E 5TH, SUITE 2700 1516 S. Boston, Ste 215	TULSA OK 74103 Tulsa, OK 74119
S	ADERHOLD, J. CULLEN	4301 THANKSGIVING TOWER, 1001 EL	DALLAS TX 75201
MD	Brandes, Angela	Morsenbroicher WEG 200	D-40470 Dusseldorf, Germany
AS	Hoffman, Carole	1516 S. Boston, Ste 215	Tulsa, OK 74119

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

Suite, Apt. #, Etc.

City

000003070440--7

-12/15/99-01014-007

***750.00 ***750.00

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

John J. Linniman, ASSIST. VICE PRESIDENT

Date December 3, 1999

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

REQUIRED

Date

Daytime Phone #

10/16/99

918-587-9901

KE