

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

99 JAN 8 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000002069

1. Corporation Name

NHP-HDV SEVENTEEN, INC.

Principal Place of Business

Mailing Address

1225 EYE ST NW, STE 200
WASHINGTON DC 20005
US

1225 EYE ST NW, STE 200
WASHINGTON DC 20005
US



REINSTATEMENT

98-99
AD

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

04/24/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

54-1801918

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

| 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 |
|---------------|---|--|-------------------------|
| CEO | TERRY CONSIDINE | 1873 SOUTH BELLAIRE ST, 17TH FLO | DENVER CO 80222 |
| VP | STEVEN D IRA | 1873 SOUTH BELLAIRE ST, 17TH FLO | DENVER CO 80222 |
| VP | THOMAS W TOOMEY | 1873 SOUTH BELLAIRE ST, 17TH FLO | DENVER CO 80222 |
| VP | DAVID L WILLIAMS | 1873 SOUTH BELLAIRE ST, 17TH FLO | DENVER CO 80222 |
| VP | HARRY G ALCOCK | 1873 SOUTH BELLAIRE ST, 17TH FLO | DENVER CO 80222 |
| VP | CARLA STONER | 1873 SOUTH BELLAIRE ST, 17TH FLO | DENVER CO 80222 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

Karen B. Rozar

Karen B. Rozar, As Its Agent

Date

1-8-99

REGISTERED AGENT MUST SIGN

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.

NHP-HDV Seventeen, Inc.

SIGNATURE: By:

Cheryl E. Goldschmitt

12/15/98

202/216-2933

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Cheryl E. Goldschmitt - Assistant Secretary

CR2ED40 (9/98)



ACCOUNT NO. : 072100000032

REFERENCE : 091121 5056396

AUTHORIZATION : *Patricia P...*

COST LIMIT : \$ ~~500.75~~ 908 ²⁵⁰⁰ *Rem*

ORDER DATE : January 7, 1999

ORDER TIME : 11:10 AM

ORDER NO. : 091121-005

CUSTOMER NO: 5056396

CUSTOMER: Ms. Cheryl Goldschmitt
Aimco
1225 Eye Street, Nw
Suite 200
Washington, DC 20005

ANNUAL REPORT FILING

RECEIVED
99 JAN -8 PM 12:14
DEPARTMENT OF STATE
DIVISION OF CORPORATE AFFAIRS
TALLAHASSEE, FLORIDA

NAME: NHP-HDV SEVENTEEN, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: ROBERT MAXWELL

EXAMINER'S INITIALS: _____