

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # F97000000169

99 NOV -1 PM 12:47

1. Corporation Name

EQI FINANCING CORPORATION

Principal Place of Business

Mailing Address

4735-SPOTTSMWOOD #201
MEMPHIS TN 38117

Both

4735-SPOTTSMWOOD #201
MEMPHIS TN 38117

*7700 WOLF RIVER BLVD
GERMANTOWN, TN 38138*

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

01/10/1997

5. FEI Number

742
62-1609 APPLIED FOR

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DCP CEO	MCNEILL, PHILLIP H SR	4735-SPOTTSMWOOD #201 7700 WOLF RIVER BLVD	MEMPHIS TN 38117 GERMANTOWN, TN 38138
VST PRES	SILVER, HOWARD A	4735-SPOTTSMWOOD #201	MEMPHIS TN 38117
VS CFO	LEVINE, DAVID L DEMSEY, DONALD	4735-SPOTTSMWOOD #201	MEMPHIS TN 38117
S	PARKER, CONNIE O	4735-SPOTTSMWOOD #201	MEMPHIS TN 38117
VP	COOPER, J. RONALD	4735-SPOTTSMWOOD #201	MEMPHIS TN 38117

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

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

REGISTERED AGENT MUST SIGN

Date

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

J. RONALD COOPER VICE PRESIDENT

Date

Daytime Phone #



EQUITY INNS

7700 Wolf River Boulevard
Germantown, TN 38138
Telephone 901-754-7774

October 25, 1999

DIVISION OF CORPORATIONS
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Dear Sir:

In December 1998, we moved our corporate office to 7700 Wolf River Boulevard, Germantown, TN 38138. We instructed the post office to forward all mail to our new address.

Apparently, the 1999 Florida Annual Report Form was not forwarded to us, since today we received a Notice of Dissolution. We have completed the form and attached our check for the \$150 annual fee. We hereby request that the penalty for reinstatement be waived since we in no way intended to be delinquent with our filing and payment for the 1999 fee.

Thank you for your consideration in waiving this fee.

Sincerely,

Ron Cooper
Vice President

RC/csb

Enclosure