

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F97000004254**

1. Corporation Name

**REALTY ASSOCIATES FUND IV TEXAS CORPORATION**

Principal Place of Business

Mailing Address

C/O TA ASSOCIATES REALTY  
28 STATE STREET, 10TH FLOOR  
BOSTON MA 02109

C/O TA ASSOCIATES REALTY  
28 STATE STREET, 10TH FLOOR  
BOSTON MA 02109

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

**FILED**

03 DEC 22 PM 12:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**REINSTATEMENT 03**

4. Date Incorporated or Qualified  
To Do Business in Florida

08/13/1997

5. FEI Number

04-3341886

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 3	City / State / Zip 4
DCP	RUANE, MICHAEL A	28 STATE STREET, 10TH FLOOR	BOSTON MA 02109
DV	HARMELING, MARK M	28 STATE STREET, 10TH FLOOR	BOSTON MA 02109
<del>DVTS</del>	<del>NEHER, ANDREW M</del>	<del>28 STATE STREET, 10TH FLOOR</del>	<del>BOSTON MA 02109</del>
AS	SAKOWICH, KAREN L	28 STATE STREET, 10TH FLOOR	BOSTON MA 02109

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

400025681414

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. or 617.0505, F.S.

Signature of  
Registered Agent

*[Signature]* **REGISTERED AGENT MUST SIGN**

**Asst. V.P.**

Date

12-19-2003

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]*  
Richard G. Egan, **Asst. V.P., Treasurer and Secretary**

11/20/03

617 476 2700

Date

Daytime Phone #

CR2E040 (7/03)

Realty Associates Fund IV Texas Corporation  
List of Officers and Directors – Florida Reinstatement

7.

Title	Name	Address:
✓ DCP	Michael A. Ruane	28 State Street, 10 <sup>th</sup> Fl. Boston, MA 02109
VTS	Richard G. Egan, Jr.	28 State Street, 10 <sup>th</sup> Fl. Boston, MA 02109
✓ DV	Mark M. Harmeling	28 State Street, 10 <sup>th</sup> Fl. Boston, MA 02109
D	Noel Posternak	28 State Street, 10 <sup>th</sup> Fl. Boston, MA 02109
AS	Karen Magno	28 State Street, 10 <sup>th</sup> Fl. Boston, MA 02109

TRA 1849127v1



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 368395 4304937

AUTHORIZATION : *Patricia Pizutto*

COST LIMIT : \$ 750.00

ORDER DATE : December 19, 2003

ORDER TIME : 9:45 AM

ORDER NO. : 368395-005

CUSTOMER NO: 4304937

CUSTOMER: Anne T. Leland, Legal Asst  
Mintz, Levin, Cohn, Ferris,  
One Financial Center

Boston, MA 02111

REINSTATEMENT

NAME: REALTY ASSOCIATES FUND IV  
TEXAS CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
03 DEC 22 AM 10:51  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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