

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **F97000006748**

1. Corporation Name

SUMMERWALK GP, INC.

Principal Place of Business

Mailing Address

1873 SOUTH BELLAIRE STREET
DENVER CO 80222-4300

1873 SOUTH BELLAIRE STREET
DENVER CO 80222-4300

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 1700

Suite, Apt. #, etc.
Suite 1700

City & State

City & State

Zip

Country

Zip

Country

FILED

99 NOV -2 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT **99**

4. Date Incorporated or Qualified
To Do Business in Florida

12/19/1997

5. FEI Number 56-2078643

APPLIED FOR

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$875 A fee is 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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	JARRARD, WILLIAM H JR Kompaniez, Peter	ONE INSIGNA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENWILE CO 80222 Denver, CO 80222
VS	LEBEY, DANIEL Bonder, Joel	ONE INSIGNA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENWILE CO 80222 Denver, CO 80222
VT	URETTA, RONALD Heath, Patricia	ONE INSIGNA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENWILE CO 80222 Denver, CO 80222
AS V	BUECHLER, KELLY M Foye, Patrick	ONE INSIGNA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENWILE CO 80222 Denver, CO 80222
EX D	KONG, MARTHA L Considine, Terry	ONE INSIGNA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENWILE CO 80222 Denver, CO 80222

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	200003038842--3
Suite, Apt. #, Etc.	-11/09/99--01004--019
City	***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

Anna R. Duff
REGISTERED AGENT MUST SIGN

Date **11-2-99**

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

Joel Bonder

Joel Bonder, Executive VP/Secretary

4-23-99

(303) 757-8101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #