

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **103028**

1. Corporation Name
Eastern Real Property, Inc

Principal Place of Business Mailing Address
1001 Fannin Ste 4000 Houston Tx 77002 **1001 Fannin Ste 4000 Houston Tx 77002**

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

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

REINSTATEMENT **09**

4. Date Incorporated or Qualified To Do Business in Florida **SP**
5. FEI Number **59-2859407** 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City, State, Zip
PR	Miller Mathews	1001 Fannin Ste 4000 Houston Tx 77002	000003070016--9
VPT	Bryan J. Blankfield	1001 Fannin Ste 4000 Houston Tx 77002	-12/14/99--01097--008
VP/AT	Robert G. Simpson	1001 Fannin Ste 4000 Houston Tx 77002	****758.75 ****758.75
TR	Ronald Jones	1001 Fannin Ste 4000 Houston Tx 77002	
Dir	Bryan J. Blankfield	1001 Fannin Ste 4000 Houston Tx 77002	
VP/AT	Jeffrey Draper	1001 Fannin Ste 4000 Houston, Tx 77002	

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent
Name **CT Corporation System**
Street Address (P.O. Box Number is Not Acceptable) **1200 South Pine Island Road**
Suite, Apt. #, Etc.
City **Plantation** State **FL** Zip Code **33324**

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 **Connie Bryan** **CONNIE BRYAN**
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN Date **12/14/99**

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.

SIGNATURE: **Jeffrey A. Draper, VP.** **11/30/99**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #