

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

99 NOV -2 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P07227

1. Corporation Name

AMREAL REALTY, INC.

Principal Place of Business

Mailing Address

~~CORPORATE ACCOUNTING~~  
~~INCORPORATED~~  
US

1873 SOUTH BELLAIRE STREET  
DENVER CO 80222-4300  
US



REINSTATEMENT 99

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

2. New Principal Office Address, If Applicable  
1873 South Bellaire Street

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

08/28/1985

Suite, Apt. #, etc.  
Suite 1700

Suite, Apt. #, etc.

5. FEI Number

57-0768082

Applied For

Not Applicable

City & State  
Denver, CO

City & State

Zip  
80222

Country  
USA

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	JARRARD JR, WILLIAM H Kompaniez, Peter	ONE INSIGNIA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENVILLE SC Denver, CO 80222
VPS	LEBEY, DANIEL Bonder, Joel	ONE INSIGNIA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENVILLE SC Denver, CO 80222
VPT	URETTA, RON Heath, Patricia	ONE INSIGNIA FINANCIAL PLAZA 1873 S. Bellaire St., #1700	GREENVILLE SC Denver, CO 80222
C	LONG, MARTHA L	ONE INSIGNIA FINANCIAL PLAZA	GREENVILLE SC
AS	BUECHLER, KELLEY M	ONE INSIGNIA FINANCIAL PLAZA	GREENVILLE SC

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)

5000003038845--3

Suite, Apt. #, Etc.

-11709799--01004--020

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 607.0506, F.S.

Signature of  
Registered Agent

*Anna R. Purdy*

Date

11-2-99

REGISTERED AGENT MUST SIGN

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, Secretary

10-22-99

(303) 757-8101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #