

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 NOV 15 PM 3:13

DOCUMENT # P24570

1. Corporation Name
TCW Realty Fund VA Holding Company

Principal Place of Business Mailing Address

If above addresses are incorrect in any way, file through incorrect information and error correction below.

2. New Principal Office Address, if Applicable CB Richard Ellis Investors LLC Suite, Apt. #, etc. 865 S. Figueroa St., #3500 City & State Los Angeles, CA Zip 90017		3. New Mailing Office Address, if Applicable c/o CB Richard Ellis Investors LLC Suite, Apt. #, etc. 865 S. Figueroa St., #3500 City & State Los Angeles, CA Zip 90017		4. Date Incorporated or Qualified To Do Business in Florida 5/31/1989	
Country U.S.A.		Country U.S.A.		5. FEI Number 95-4154019	
				Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$375 Additional Fee required to a Certificate of Status					

7. Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officer and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	Robert H. Zerbst	865 S. Figueroa St., #3500	Los Angeles, CA 90017
S	Herbert L. Roth	865 S. Figueroa St., #3500	Los Angeles, CA 90017
T	Laurie E. Romanak	865 S. Figueroa St., #3500	Los Angeles, CA 90017
D	Scott E. Tracy	865 S. Figueroa St., #3500	Los Angeles, CA 90017
D	William M. Harris	865 S. Figueroa St., #3500	Los Angeles, CA 90017

8. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 Hays Street, Suite 105 Tallahassee, FL 32301		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL	
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10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 807.0505, F.S.
Signature of Registered Agent _____ Date 11/22/99
REGISTERED AGENT MUST SIGN
800003051538-3
-11/22/99-01117-015
****158.75**** 58.75

11. This corporation owes 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 807 or 817, 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 807.0401 or 817.0401, 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 110.07(3)(f), 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: 10/27/99 (213) 683-4200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Herbert L. Roth Date

MAYER, BROWN & PLATT

350 SOUTH GRAND AVENUE

25TH FLOOR

LOS ANGELES, CALIFORNIA 90071-1503

WRITER'S DIRECT DIAL:
(213) 229-5133

MAIN TELEPHONE
213-229-9500
MAIN FAX
213-625-0248

October 27, 1999

VIA AIR COURIER

Florida Department of State
Attention: Division of Corporations
Reinstatement Department
409 East Gaines Street
Tallahassee, Florida 32399

Re: 1999 Application for Reinstatement
TCW Realty Fund VA Holding Company

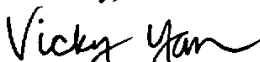
Ladies and Gentlemen:

In accordance with instructions received in a telephone conversation with representatives of the Reinstatement Department, this letter will confirm and inform you that no annual report form or notices were ever received prior to the receipt of a Notice of Administrative Dissolution or Revocation for the above-referenced corporate entity.

Enclosed please find one (1) original and one (1) copy of the required reinstatement form together with a check in the amount of \$158.75. Please file the original and conform the copy and return the same to the undersigned in the enclosed self-addressed envelope.

Your immediate attention to this matter is greatly appreciated. If you have any questions, please do not hesitate to call me.

Sincerely,


Vicky W. Yan
Paralegal

Enclosures

cc: Todd Evan Stark, Esq.

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