

SENT BY:

10-10- 0 : 9:43AM :

10/04/00 WED 13:25 FAX 203 834 0828

COMMONFUND REALTY

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # ? 29722

1. Entity Name

ENDOWMENT REALTY INVESTORS, INC.

Principal Place of Business

15 Old Danbury Road
Wilton, Connecticut 06897

Mailing Address

P.O. Box 812
Wilton, Connecticut
06897

2. Principal Place of Business

15 Old Danbury Road

3. Mailing Address

P.O. Box 812

State, Apt. & etc.

State, Apt. & etc.

City & State

Wilton, CT

City & State

Wilton, CT

Zip

06897

Country

U.S.A.

Zip

06897

Country

U.S.A.

4. FEI Number

061249185

Applies For

Not Applicable

5. Confirmation of Status Required

☒

6.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Corporation Service Company
1201 Rays Street
Tallahassee, Florida 32301

8. Name and Address of Prior Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City

FL

Do Code

9. The filer named only executes this statement for the purpose of changing the registered office or agent of the corporation or partnership.

Signature *Laura R. Miller*
Name *Laura R. Miller*
Title *as its agent*

10/10/00

10. This corporation is eligible to qualify for Subchapter S. Yes ☒ No ☐
(Check one box only)

11. Election Certificate Filing Fee Paid (Check one box)

\$4.00 May Be Added to Fee

OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY - ST - ZIP	NAME	STREET ADDRESS	CITY - ST - ZIP
Treasurer					
NAME	NAME		NAME	NAME	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY - ST - ZIP	CITY - ST - ZIP		CITY - ST - ZIP	CITY - ST - ZIP	
NAME	NAME		NAME	NAME	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY - ST - ZIP	CITY - ST - ZIP		CITY - ST - ZIP	CITY - ST - ZIP	
NAME	NAME		NAME	NAME	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY - ST - ZIP	CITY - ST - ZIP		CITY - ST - ZIP	CITY - ST - ZIP	
NAME	NAME		NAME	NAME	
STREET ADDRESS	STREET ADDRESS		STREET ADDRESS	STREET ADDRESS	
CITY - ST - ZIP	CITY - ST - ZIP		CITY - ST - ZIP	CITY - ST - ZIP	

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)

NAME	STREET ADDRESS	CITY - ST - ZIP	NAME	STREET ADDRESS	CITY - ST - ZIP

12. I hereby certify that the information reported on this filing document is true and correct to the best of my knowledge and belief, and that I am an officer or director of the corporation or partnership.

SIGNATURE: *Everett B. Miller III*
EVERETT B. MILLER III
CHIEF OPERATING OFFICER
203 583 5072

00 OCT -10 PM 1:39

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

CIVIL RIGHTS

AD

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To:

Division of Corporations
Fax Number : (850) 922-4004

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 521-1030

CORPORATION REINSTATEMENT**ENDOWMENT REALTY INVESTORS, INC.**

Certificate of Status	0
Certified Copy	0
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