

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 SEP 11 AM 8:49

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT #

P32511

1. Corporation Name

ROSEWOOD APARTMENTS CORPORATION

Principal Place of Business

9090 Wilshire Blvd.
Suite 201
Beverly Hills, CA 90211
USA

Mailing Address

9090 Wilshire Blvd.
Suite 201
Beverly Hills, CA 90211
USA

-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

4. Date Incorporated or Qualified
To Do Business in Florida

01/14/91

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

95-3812630

Not Applicable

Zip

Country

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)

Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
CEO	BOXENBAUM, CHARLES H.	9090 Wilshire Blvd., #201	Beverly Hills, CA 90211
PRES.	NELSON, BRUCE	9090 Wilshire Blvd., #201	Beverly Hills, CA 90211
DIR.	CASDEN, ALAN	9090 Wilshire Blvd., #201	Beverly Hills, CA 90211
S	SUSSMAN, JEFF	9090 Wilshire Blvd., #201	Beverly Hills, CA 90211
CFO	BRIAN, SHUMAN	9090 Wilshire Blvd., #201	Beverly Hills, CA 90211
VAS	TOY, PATRICIA	9090 Wilshire Blvd., #201	Beverly Hills, CA 90211

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CT CORPORATION
121200 S. Pine Island Road
Plantation, FL 33324

Name

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

400003338404--4

Suite, Apt. #, Etc.

09/19/00-01060-025

***\$300.00 ***\$300.00

City

State

Zip Code

FL

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

Date

REGISTERED AGENT MUST SIGN

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

KE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/00

Date

310-278-2191

Daytime Phone #