

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 SEP 30 PM 3: 07

DOCUMENT # P37372

1 Corporation Name

NHP CAPITAL CORP.

Principal Place of Business

Mailing Address

400003003584--0

-10/04/99--01015--011

***1650.00 ***1650.00

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

2 New Principal Office Address, If Applicable
 1873 S BELLAIRE ST

3 New Mailing Office Address, If Applicable
 1873 S BELLAIRE ST

4 Date Incorporated or Qualified
 To Do Business in Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5 FEI Number

Applied For

SUITE 1700

SUITE 1700

54-1609974

Not Applicable

City & State

City & State

6 CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
 for a Certificate of Status

DENVER, CO

DENVER, CO

Zip 80222

Country US

Zip 80222

Country US

7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 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
P/D	PETER KOMPANIEZ	1873 S BELLAIRE ST, STE 1700	DENVER, CO 80222
C/D	TERRY CONSIDINE	1873 S BELLAIRE ST, STE 1700	DENVER, CO 80222
S/V	JOEL BONDER	1873 S BELLAIRE ST, STE 1700	DENVER, CO 80222
T/V	PATRICIA HEATH	1873 S BELLAIRE ST, STE 1700	DENVER, CO 80222
REINSTATEMENT 93-99 104-99 LF			

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

Name

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

Suite, Apt. #, Etc.

City

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 607.0505, F.S.

Signature of Registered Agent

Laura E. Duff

REGISTERED AGENT MUST SIGN

Date 10.1.99

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 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, SECRETARY)
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept. 20, 1999
 Date

(303) 757-8101
 Daytime Phone #

CR2001 (12/98)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 299777 7183920

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : July 7, 1999

ORDER TIME : 12:30 PM

ORDER NO. : 299777-060

CUSTOMER NO: 7183920

CUSTOMER: Leslie Green, Corp Paralegal
AIMCO
AIMCO
1225 Eye Street, Nw
Suite 200
Washington, DC 20005

File
121

DOMESTIC FILING

NAME: NHP CAPITAL CORPORATION

EFFECTIVE DATE:

☐ REINSTATEMENT
☐ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

EXAMINER'S INITIALS: _____

RECEIVED
SEP 30 PM 1:1
TALLAHASSEE, FLORIDA