

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC -4 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000082921

1. Corporation Name

St. Mary's Affordable Housing, Inc.

2. Principal Office Address

101 Arch Street

Suite, Apt. #, etc.

13 floor

City & State

Boston, MA

Zip

02110

Country

United States

3. Mailing Office Address

101 Arch Street

Boston, MA 02110

Suite, Apt. #, etc.

13 floor

City & State

Boston, MA

Zip

02110

Country

United States

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/23/1993

5. FEI Number

59-3200325

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T Corporation System

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

1200 S. Pine Island Rd.

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Kushn Keger
REGISTERED AGENT MUST SIGN

Date

12/3/02

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P D	Michael H. Gladstone	101 Arch Street	Boston, MA 02110

10. 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.

By: BF Real Properties, Inc.; By: Michael H. Gladstone VP
SIGNATURE: *[Signature]* 11/21/02 (617) 439-3911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #