

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # PA4000010155

1. Corporation Name

BRANDYWINE REAL ESTATE INVESTMENT CORP III

FILED
97 FEB 21 AM 11:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

POOR ORIGINAL

Principal Place of Business

184 Plantation Circle South
Ponte Vedra Beach, FL 32082

Mailing Address

184 Plantation Circle, S.
Ponte Vedra Beach, FL
32082

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 Address, if Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

1/31/94

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

52-1863581

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☒56 (a) address and name of agent
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)

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
PST	Rueger, Thomas E.	1081 Squire Cheyney Dr.	West Chester, PA 19380
VP	Kelly, Thomas E.	1081 Squire Cheyney Dr.	West Chester, PA 19380

REINSTATEMENT 96-97 2/21/97

8. Name and Address of Current Registered Agent

Bartlett, Baron L.
50 Hwy. A1A, North, Ste. 103
Ponte Vedra Beach, FL 32082

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

200002006542
-02/25/97-01057-005
*****923
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.

Date

2/14/97

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 857 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 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. 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

PRES. Thomas E. RUEGER
VP Thomas Kelly

Date

2/20/97

Daytime Phone

(610)-594-5000
(610)-793-1866