

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 FEB -3 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000091637

1. Corporation Name

Affordable Properties General Partner of Ohio, Inc.

REINSTATEMENT 03-06

T. Roberts FEB 06 2006
CR2Evol (orw)

2. Principal Office Address
621 East Pratt Street

3. Mailing Office Address
621 East Pratt Street

Suite, Apt. #, etc.
Suite 300

Suite, Apt. #, etc.
Suite 300

City & State
Baltimore, MD

City & State
Baltimore, MD

Zip
21202

Country
Baltimore

Zip
21202

Country
Baltimore

**4. Date Incorporated or Qualified
To Do Business in Florida** 10/24/1997

5. FEI Number
59-3477638

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

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33324

800062126843
12/13/95 81054 814 **1050.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 617.0503, F.S.

Signature of
Registered Agent

Connie Bryan

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN

Date Feb. 03, 2004

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
Pres/Dir	Michael H. Gladstone	101 Arch Street	Boston, MA 02110
Trea.	Karen L. Edlund	101 Arch Street	Boston, MA 02110
VP	Melissa D. Smith	101 Arch Street	Boston, MA 02110
VP	Armando Perez	101 Arch Street	Boston, MA 02110

800062126848
02/10/06 01000 000 **150.00

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 807 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 807.0401 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: Melissa D. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Melissa D. Smith

Date

Daytime Phone #

443-263-2883

12-7-05