

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A07302

i. Entity Name
EUSTIS APARTMENTS, LTD.



FILED

2003 JUN 10 AM 4:55

**DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA**



Principal Place of Business 200 S. COLORADO BLVD., TOWER TWO SUITE 2-1000 DENVER CO 80222	Mailing Address 2000 S. COLORADO BLVD., TOWER TWO SUITE 2-1000 DENVER CO 80222
---	--

2. Principal Place of Business 4582 S. ULSTER ST. PKWY. Suite, Apt. #, etc. SUITE 1100	3. Mailing Address 4582 S. ULSTER ST. PKWY. Suite, Apt. #, etc. SUITE 1100
--	--

DUE BY MAY 1, 2003

City & State DENVER	City & State DENVER	4. FEI Number 52-1167762	Applied For <input type="checkbox"/> Not Applicable
Zip 80237	Country US	Zip 80237	Country US

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYS ST.
SUITE 105
TALLAHASSEE, FL FL 32301**

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

FL

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$0.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
--	---	--

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
DOCUMENT # A06999 NAME NATIONAL HOUSING PARTNERSHIP STREET ADDRESS 2000 S. COLORADO BLVD., TOWER TWO, #2-1000 CITY-ST-ZIP DENVER CO 80222	STREET ADDRESS 4582 S. ULSTER ST. PKWY. SUITE 1100 DENVER, CO 80237 CITY-ST-ZIP _____
DOCUMENT # _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	STREET ADDRESS _____ CITY-ST-ZIP _____
DOCUMENT # _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	STREET ADDRESS _____ CITY-ST-ZIP _____
DOCUMENT # _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	STREET ADDRESS _____ CITY-ST-ZIP _____
DOCUMENT # _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	STREET ADDRESS _____ CITY-ST-ZIP _____
DOCUMENT # _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	STREET ADDRESS _____ CITY-ST-ZIP _____
DOCUMENT # _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	STREET ADDRESS _____ CITY-ST-ZIP _____

500020776885
06/11/03 01027 011 **13836.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: CHAD ASARCH, on behalf of THE NATIONAL HOUSING PARTNERSHIP, LTD. (Doc. #A06999) 6/4/03 303-757-8101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

0020976 FP

CR2E003 (10/02)

STAPLE CHECK HERE