FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DE PARAMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCLIMENT #

ELUCION STATE OF STATE OF CORPORATIONS

97 DEC 18 PH 1:31

A96000013		01323		
SUNSET CLUB APARTMI	ENTS, LTD.		1 400 014 1015 1014 0144 0144 0044 1	######################################
Malling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record
C/O EDWARD A. LASHINS. JR. 80 BUSINESS PARK DRIVE ARMONK NY 10504	•	C/O EDWARD A. LASHINS. JR. 80 BUSINESS PARK DRIVE ARMONK NY 10504		\$2,400,000.00 1,026,305 5b. Amount of Capital Contributions in LLORIDA
2. Mailing Address	2a. Principal Office Addr	2a. Principal Office Address		1,026,305
Suite, Apt. #, etc. City & Stato	Suite, Apt. #, etc.	Suite, Apt. #, etc. City & State		Applied For Not Applicable
Zip Country	Zip			\$8.75 Additional Foo Required
			8. Make check payable to: Dept. of	State (See reverse side for fee information)
9400 SOUTH DADELAND BLVD., SUITE 600 MIAMI FL 33156 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Revide Statutes, the above for the purpose of changing its registered office or registered agent, or both, in the Stategent, am familiar with, and accept the obligations of section 620 192, Revide Statutes		te of Florida. Such change was authorized by its general partner(s). The		FL Zip Code 33143 In State of Florida, submits this statement
SIGNATURE (Registered Agent According Appro	THAT IS A CORPORATION MUST BE REGISTERED	ON, LIMITED PA	RTNERSHIP OR OTHE WITH THIS OFFICE.	
11. Name(s) of General Partner(s)	11a. (Do NO) Use Post C	iffice Box Numbers)		11c. Registration/ Document Number
SUNSET CLUB APARTMENTS, IN	C. 80 BUSINESS PARI	(DRIV	ARMONK NY 10504	P96000058477
			-12/31	36169315

12, I do hereby certify that the information supplied with this flug is voluntarily furnished and does not qualfy for the exemption stated in Section 119 07(3)(k), Florida Statutes Trelease 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 further certify that the information indicated on this annual roport is true and accurate and true missing signature shall have the same logal effects as if marte under oath. I further certify that I am a General Parlner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Ella Lilia, Ros. d.G.P. Typed or Printed Name of General Partner Signing Form SUNSET CLUB APARTMENTS, TNC, -

DATE 12/9/97

Daytime Telephone Number 814-273-5200