1. Entity Name RPK ASSOCIATES, LTD.

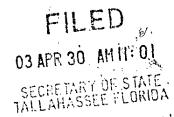


Principal Place of Business 599 WEST PUTNAM AVENUE. SUITE 3

GREENWICH CT 06830-6005

Mailing Address 599 WEST PUTNAM AVENUE, SUITE 3

GREENWICH CT 06830-6005



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2. Principal Place of Business 3. Mailing Address 3.19 Clematis Street 3.19 Clemati		chrot	430	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5(100)	1 1 4 1	
Suite 901	Suite 901		DUIE BY MAY 1, 2003	
West Palm Beach, FL	West Palm B	xach, FL	4. FEI Number 06-1566583 Applied For Not Applicable	
(Zip Country USA	^{zip} 33401	Country USA	5. Certificate of Status Desired See Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent	
REGISTERED AGENTS OF FLORIDA, LLC 100 S.E. SECOND STREET		Name		
		Street Address	Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131				
;		City	FL Zip Code	
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 ————————————————————————————————————				
9. Capital Contributions \$4,467,577.00				
as shown on record.				
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 / L99000009346 NAME RPK HOUSING, L.L.C. STREET ADDRESS 599 WEST PUTNAM AVENUE, SUITE 3		STREET ADDRESS	04/30/0301.088006 **526.25	
				
CITY-ST-ZIP GREENWICH CT 06830-6005		CITY-ST-ZIP		
DOCUMENT #		STREET ADDRESS	19136100 01000 000 14360 25	
NAME STREET ADDRESS				
CITY-ST-ZIP		CITY-ST-ZIP		
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STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP		
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DOCUMENT #		STREET ADDRESS		
NAME STREET ADDRESS		ļ		
CITY-ST-ZIP ·		CITY-ST-ZIP		
DOCUMENT # NAME	•	STREET ADDRESS		
STREET ADDRESS		CITY-ST-ZIP		
CITY-ST-ZIP	this filling done not qualify for		Section 119.07/3Vi) Florida Statutas I further certify that the information	

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 empowerer to execute this report as required by Chapter 620, Florida Statutes

Krisha M. Miller President

GNATURE:

GNATURE:

GNATURE:

12103

203-869-0900

SIGNATURE:

STAPLE CHECK HERE

MAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #