



THE UNITED STATES  
CORPORATION  
COMPANY

A 29928

ACCOUNT NO. : 072100000032

REFERENCE : 980722 4321791

AUTHORIZATION :

COST LIMIT : \$ 35.00

*Patricia Pzynt*

ORDER DATE : January 29, 2001

ORDER TIME : 12:44 PM

ORDER NO. : 980722-405

CUSTOMER NO: 4321791

500003656195--4

CUSTOMER: Ms. Lesley V. Benjamin  
The Related Companies, Inc.  
625 Madison Avenue, 9th Floor

New York, NY 10022

CHANGE OF AGENT

NAME: FLORIDA HIGH YIELD TAX CREDIT  
PROPERTIES LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

*WJ*  
*2/7*

FILED  
RECEIVED  
01 FEB -7 PM 12:58  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED  
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. FLORIDA HIGH YIELD TAX CREDIT PROPERTIES, LIMITED PARTNERSHIP

Name of the limited partnership

2. 04/16/1990

Date of filing/registration in Florida

3. A29928

Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and/or office:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box not acceptable)

Tallahassee

FL

32301

City, State and Zip

6. Such change(s) was/were authorized by the general partners.

Alan P. Humes  
Signature of General Partner

Alan P. Humes, SR V.P.

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

Corporation Service Company

Cecil K. Doherty  
Signature of Registered Agent

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00**