SIGNATURE: WILLIAM S FRIEDMAN

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

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. SIGNATURE:

Electronic Signature of Registered Agent

() **D** () . .

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	FRIEDMAN, WILLIAM S	Name	ROTHENBERG, ROBERT P
Address	192 LEXINGTON AVE - 9TH FLOOR	Address	192 LEXINGTON AVE - 9TH FLOOR
City-State-Zip:	NEW YORK NY 10016	City-State-Zip:	NEW YORK NY 10016

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1000003971

Entity Name: ANSONIA APARTMENTS HOLDINGS LLC

Current Principal Place of Business:

% TARRAGON CORP - ATTN: WILLIAM S FRIEDMAN 192 LEXINGTON AVE - 9TH FLOOR NEW YORK, NY 10016

Current Mailing Address:

% TARRAGON CORP - ATTN: WILLIAM S FRIEDMAN 192 LEXINGTON AVE - 9TH FLOOR NEW YORK, NY 10016

FEI Number: 27-2948556

Name and Address of Current Registered Agent:

ROTHENBERG, ROBERT P 3140 COLLINS AVENUE 17F MIAMI, FL 33140 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and

MANAGER

FILED Jan 16, 2013 Secretary of State CC5329618945

Certificate of Status Desired: Yes

01/16/2013 Date

Date