File Now. Filing Fee after May 1 is \$225,00k 550.00

CORPORATION FLORIDA DEPARTMENT OF STATE ANNUAL REPORT FILED 1998^{x 97} DIVISION OF CORPORATIONS 97 MAY -6 PM 1:07 1. Name and Mailing Address of Corporation: DOCUMENT # 377679 FIELDSTONE APTS., INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/25/1971 3a. Date of Last Report 04/29/1.996 If above mailing address is incorrect in any way, line through incorrect Information and enter correction in Block 2 Applied For 4. FEI Number ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE FILING FEE 59-1394780 MAKE CHECK PAYABLE TO DEPARTMENT OF STATE Not Applicable \$200.00 5. Certificate of Status Desired 2a. Principle Place of Business 2. Mailing Address \$8.75 Administ 9172 Froude Ave 9172 Froude Ave Suite, Apt. #, etc. 6, Election Campaign Financing Suite, Apt. #, etc. \$5.00 May Be Trust Fund Contribution 27 22 Added to Fees City & State
Surfside 7. Nonprofit with IRS 501(c)(3) City & State Surfside \$138.75 Supplemental FLFL Tax Exempt Status 23 28 Fee Not Required 8. This corporation has liability for intangible tax under \$, 199.032, Country Country 33154 33134 USA USA Florida Statutes Yes DENO 30 25 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ROBERT PERWIEN DR. JONATHAN PERWIEN 9172 Froude Ave Street Address (P.O. Box Number is Not Acceptable) Surfside, FL 33154 8566 N.W. 43 Court 83 Coral Springe 11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as presented agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. of Accepting Applica SIGNATURE OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS CHANGES 12 13. resident 1.1 TITLE 1.1 101.6 DR. JONATHAN PERWIEN 1.2 NAME 1.2 NAME 8566 N.W. 43rd Court 1.3 ADDRESS 1.3 ADDRESS Coral Springs, FL 33065 (33065 1.4 CITY-ST-ZIP 1.4 CHY- ST-ZIP 2.1 TITLE Vice-President 2.1 1011 MAXWE! PERWIEN 2.2 NAME 2.2 NAME 2.3 ADDRESS 5200 W. 105 Street 2.3 ADDRESS 2.4 CITY-ST-ZIP 2.4 City-ST-ZIP Bloomington, MN 55437 3.1.T(TLE) 3 1 11111 Secretary/Treasurer 3.2 NAME 3.2 NAME RENA PERWIEN 3.3 ADDRESS 3.3 ADDRESS 347 Ironbark Dr Webster, TX 77598 3 ♠ CHTY - ST - ZIP 3.4 CITY-ST-ZIP 4.1 TITLE 4. TITLE 600002178316--6 -05/14/97--01076--011 4.2 NAME 4 NAME 43 ADDRESS 4.3 ADDRESS ****165.00 ****165.00 4.4 CITY - ST- ZIP 4.4 Oil Y - ST - ZIP 5.1 TITLE 5.1 TILE 5.2 NAME 5.2 NAMi 5.3 ADDRESS SHIPPORTERS 5.4 CITY-ST-ZIP 5.4 CHY+\$1-202 6.1 TITLE 6.1 U/LF 6.2 NAME 6.2 NAME 6.3 ADDRESS 6.4 CITY-ST-ZIP 6.4 CHY+S1+ZF 14. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legacth. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 Statutes, and that my none appears in Block 12, Book 13 if a change, or on an attachment with an address. DATE Title(s) Prestount Daytime Telephone Number Print/Type Name of Signi

ONATHON PERWIEN