

A00000001404

CT CORPORATION

CORPORATION(S) NAME

The Groves Housing Partners, Ltd.

FILED
2002 JAN 17 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
02 JAN 17 AM 11:30
DIVISION OF CORPORATION

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input checked="" type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

1/17/02

Order#: 5035059

400004781884--0

-01/17/02--01045--003

Ref#: *****35.00 *****35.00

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

G. Coulliette JAN 17 2002

**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 organized under the laws of the state of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. THE GROVES HOUSING PARTNERS, LTD.
Name of the limited partnership
2. 09/12/2000 3. A00000001404
Date of filing/registration in Florida Document number assigned

4. The name and address of the present registered agent and office:

Becky T. Edwards
100 Breckstrom Drive
Oviedo, FL 32765

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324

Such change was authorized by the general partners.

The Groves Housing Associates, L.L.C., a Florida limited liability company, general partner
By: INR The Groves Limited, Inc., a Florida corporation, a managing member

By: [Signature]
Signature of General Partner

1/14/02
Date

Shelly Rubin, Vice President

Having been named as registered agent and to accept service of process for the above stated limited partnership at the place designated in this certificate, 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 obligation of my position as registered agent.

PETER F. SOUZA
ASSISTANT SECRETARY

[Signature]
Registered Agent signature

Peter F. Souza, Assistant Secretary

1/16/02
Date

Filing Fee: \$35.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHSE004(3/95)