

A05 392

FILING TRANSMITTAL FORM

TO:
Division of Corporations
Florida Department of State
409 E. Gaines Street
P. O. Box 6327
Tallahassee, FL 32314

200004656562-76
-10/29/01--01034-027
*****35.00 *****35.00

FR: Gary Sherman
DATE: October 17, 2001

RE: Providence Place Apartments Limited Partnership
LT By the Sea, Ltd.
Andover Place North Limited Partnership
Addison Park Limited Partnership
Sentinel Realty Partners II Limited Partnership
Holiday Pasco Limited Partnership
SB Partners, Ltd.
Sentinel Realty Partners III Limited Partnership

REFERENCE: 00300S

PLEASE FILE THE ATTACHED

Change of Registered Agent

A check in the amount of \$35 is enclosed for each filing.

PLEASE OBTAIN THE FOLLOWING EVIDENCE:

One Filed stamped copy

Please call Gary Sherman at 800-300-5067 if there are any problems with this filing.

Please Return Evidence By Regular Mail to:
Gary Sherman
CONTINENTAL CORPORATE SERVICES, INC.
189 FRANKLIN AVENUE, SUITE 1
NUTLEY, NJ 07110
PHONE: 800-300-5067
FAX: 973-542-0313
Thank you.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT-29 AM 8:30

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

1. SB Partners, Ltd.
Name of the limited partnership

2. 11/19/76 3. A05332
Date of filing/registration in Florida Document number assigned

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

C T Corporation System

1200 S. Pine Island Road

Plantation, FL 33324

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

NRAI Services, Inc.

526 E. Park Avenue

Tallahassee, FL 32301

Such change was authorized by the general partners.

SB Partners Real Estate Corporation

Ellyn Baron

Signature of General Partner

By: Ellyn Baron, Assistant Secretary

October 3, 2001

Date

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.

For National Registered Agents, Inc.

Gary Sherman
Registered Agent signature

GARY SHERMAN, ASST. SECRETARY

10/3/01
Date

Filing Fee: \$35.00

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 29 AM 8:30