A06272

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Dover, DE

New York, NY

Los Angeles, CA

Albany, NY

January 12, 2005

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

RE:

WINEWOOD PARK LIMITED

LOEB PARTNERS REALTY AND DEVELOPMENT CORP.

Dear Sir/Madam:

For your information, the above entities are qualified/registered to do business in your state and we now enclose the necessary documents required to effect Change of Agent to National Corporate Research, Ltd., Inc.

In connection with this matter, we ask that you please have it filed in your office upon receipt and return the evidence to this office by means of the self-addressed envelope which we have enclosed for your convenience.

We also enclose our checks made payable to your state in payment of filing fees.

Should you have any questions in regard to the above, please do not hesitate to give me a telephone call.

Thanks again,

Rose Marie L. Cole

Customer Service Representative

Rose Marie Cole

RLC

ENCLOSURE

REGULAR MAIL

615 South DuPont Highway, Dover, Delaware 19901 (302) 734-1450 (800) 483-1140 Fax (302) 734-1476

web site: www.nationalcorp.com

e-mail: info@nationalcorp.com

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.

	AAIIAE	WOUD PA	AKK LIMITE	<u> </u>	
	Na	ame of the limit	ted partnership	···	
January 19	, 1978	3.		A06272	
Date of filing/regist	ration in Florida		Do	Document number assigned	
The name of the region Department of State:	•	e registered o	office address a	as shown on th	e records of the Florida
•	Huey, Mike	Huey, Gui	lday & Tucke	er, P.A.	
		Nam	ie		
	106	East Colle	ge Avenue		
		Addre	SS		
,	<u>Taliahas</u>	ssee	<u> </u>	32301	
		City, State	and Zip		
The name and address	ss of the new registe	ered agent an	d/or office:		
	National Co	rporate F	Research, I	Ltd., Inc.	
		Nam	le .		
-	10	3 N. Merid	lian Street		
	Florida street	address (P.O.	Box not accep	otable)	
-	<u>Talla</u> ha	ISSEE		32301	
<u> </u>		City, State	and Zip		 -
Such change(s) was/	were authorized by	the gene AL	AME: GOR	DON	
M Am		<u></u>		V	P 7 9. P.
mature of General Partner			Print Signer	s Name & Title as	nd/or Capacity
ereby accept the appo th the provisions of a niliar with and accept erely to reflect a chan	intment as registere ill statutes relative the obligations of n ge in the registered	d agent and c to the prope ny position a l'office addre	agree to act in r and complete s registered ag ess, I hereby co	this capacity. e performance gent. Or, if this onfirm that the	I further agree to comply of my duties, and I am s document is being files limited partnership ha

Print Signer's Name & Title and/or Capacity

Rose Marie Cole, Assistant Secretar

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

been notified in writing of this change.

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	WINE	WOOD PAR	K LIMITED)		
	Na	une of the limited	partnership			
2. January 19, 1978		3.				
Date of filing/regis		Doo	r assigned			
4. The name of the reg Department of State	•	registered offi	ce address a	s shown on	the records of the Florida	
	Huey, Mike	Huey, Guilda	y & Tucke	r, P.A.		
	400	Name				
	106	East College	Avenue		-	
	Address	FL	32301			
	Tallahas			32301	-	
		City, State and	•			
5. The name and addre	ess of the new registe	red agent and/o	or office:			
	National Co	rporate Re	search, L	td., Inc.		
_		Name				
	10	3 N. Meridia	n Street			
_	Florida street	address (P.O. Bo	x not accep	table)		
	Tallaha	ssee	FL	32301		
Λ .		City, State and	Zip		- 	
6. Such change(s) was	were authorized by	the gene ALA	ids GOR	DON	0 0	
(M) Am					18 J. G. P.	
Signature of General Partner			Print Signer's	Name & Title	and/or Capacity	
I hereby accept the appo with the provisions of a familiar with and accep merely to reflect a chan been notified in writing	all statutes relative i it the obligations of n nge in the registered	to the proper a ny position as re office address,	nd complete egistered ag I hereby co	e performand ent. Or, if to onfirm that t	his document is being filed he limited partnership has	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Rose Marie	Cole	Rose	Marie C	ole, Ass	istant Secretary	4
Signature of Registered Age	nt		Print Signer's	s Name & Title	and/or Capacity	

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