

A 17553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

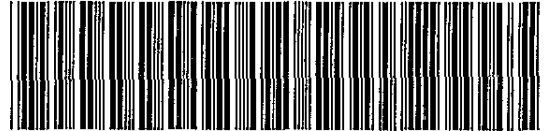
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02 DEC 10 PM 12: 25  
DIVISION OF CORPORATION

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CT CORPORATION

December 10, 2002

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Re: Order #: 5730826 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Bel Aire Apartments, Ltd. (FL)  
Change of Agent  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton  
Sr. Fulfillment Specialist  
Jeff\_Netherton@cch-lis.com

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

**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. Bel-Aire Apartments, Ltd.  
Name of the limited partnership

2. 07/30/1984  
Date of filing/registration in Florida

3. A17553  
Document number assigned

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

Lexis Document Services  
3953 W.W. Kelley Road  
Tallahassee FL 32311

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.

*Paul Foreman* *Paul Foreman*  
Signature of General Partner Date

*Lexford GP, LLC* *Attorney-in-fact*  
 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.

*Christine M. Eastwins* *12/3/02*  
Registered Agent signature Date

Christine M. Eastwins  
 Assistant Secretary

**Filing Fee: \$35.00**

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