2000 UNIFORM BUSINESS REPORT (UBR) A18366 DOCUMENT # 1. Entity Name FILED SECRETARY OF STATE DIVISION OF CORPORATIONS WINDMILL APARTMENTS, LTD. 00 MAY - 1 PM 12: 06 Mailing Address Principal Place of Business 2 EATON STREET SUITE 1100 2 EATON STREET SUITE 1100 HAMPTON VA 23669 HAMPTON VA 23669-4094 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2478513 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE 9. Capital Contributions Amount of Capital Contributions \$1,840,000.00 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 13. 12. 667885 DOCUMENT # STREET ADDRESS R.J. PROPERTIES, INC. NAME STREET ADDRESS 1400 - 66TH STREET NORTH CITY-ST-ZIP ST. PETERSBURG FL CITY-ST-ZIP DOCUMENT# A18321 STREET ADDRESS

(NOTE: Registered Agent signature required when reinstating)

SOMERSET PROP.INV. 84-IV NAME STREET ADDRESS 2 EATON ST., #1100 700003271307--8 --05/31/00-01015--027 CITY-ST-ZIP CITY-ST-ZIP HAMPTON VA DOCUMENT# ****667.50 ****526.25 STREET ADDRESS NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIF DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP STREET ADDRESS NAME 4

14. I hereby certify that the information supplied with this fling foes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this epoch as required by Chapter 620, Florida Statutes

City-st-78

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

Signature, typed or printed name of registered agent and title if applicable

Date Daytime Phone #

Aubrey L Layne, Jr. President, Great Atlantic authorized agent for Wirdmill Apartments L.