DOCUMENT # A28672 1. Entity Name 3-3 FILED ANN-ELL APARTMENTS ASSOCIATES, LTD. 02 OCT -2 PM 12: 42 SECRETARY, OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 599 W. PUTNAM AVE., 3RD FLOOR 599 W. PUTNAM AVE., 3RD FLOOR GREENWICH CT 06830 **GREENWICH CT 06830** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DUE BY SEPTEMBER 25, 2002 City & State 4. FEI Number 65-0135229 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WOLFE, LEON J Street Address (P.O. Box Number is Not Acceptable) 100 S.E. SECOND ST. **SUITE 3500** MIAMI FL 33131-2130 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions 11 MAKE CHECK PAYABLE TO DEPT OF STATE \$607,252.00 as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION 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. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY DOCUMENT / M97000000251 STREET ADDRESS HOMESTEAD B & V RECAP ASSOCIATES OF CT LLC STREET ADDRESS 300008289933-- -10/09/02--01065--019 11 MOLLY LANE CITY-ST-ZIP CITY-ST-ZIP DARIEN CT 06820 ****526.25 ****526.25 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # 1 STREET ADDRESS NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: _

CITY-ST-ZIP

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNE

Date

Dautimo Shoos #

^{14.} I hereby certify that the information supplied with this filing does 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 report as required by Chapter 620, Florida Statutes

est Putnam Avenue awich, Connecticut 06830

Phone: (203) 869-0900 Fax: (203) 869-1034

September 23, 2002

Division of Corporations Registration Section 409 E. Gaines Street Tallahassee, FL 32399

RE:

Ann-Ell Apartments Associates, Ltd. ("Ann-Ell")

Document #A28672

Dear Sir/Madam:

Enclosed is a check in the amount of \$526.25 in connection with filing the 2002 Uniform Business Report ("UBR") for Ann-Ell which was filed online. Also enclosed please find a copy of the receipt for UBR verifying online registration. This UBR, indicating that the report is due by September 25, 2002, was recently received at the principal place of business. When I contacted your office regarding the late fee applicable after May 1, I was told that this was a second notice sent for this entity, since we did not file the UBR by May 1. We respectfully request that you waive the late fee for this entity, as I am not aware of any previous UBR notice being received by our office for Ann-Ell.

Please review the enclosed and if you should have any questions or require further assistance, please do not hesitate to contact me directly at (203) 869-0900. Thank you for you assistance with this matter.

Sincerely,

Todd D. McClutchy