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May 15, 2001

Taylor Woodrow Communities 7120 S. Beneva Road

Sarasota, FL 34238-2850 (941) 927-0999 FAX (941) 925-7023

http://www.taylorwoodrowhomes.com

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

Re: Statement of Change of Registered Office

Dear Sir or Madam:

Enclosed please find the Florida form for change of registered agent address together with checks for the respective entity payable to the Department of State:

TWCF, Inc.	P25 00			
TW Acquisitions, Inc.	\$35.00			
	\$35.00			
TW En Provence, LLC	\$25.00			
Taylor Woodrow/Kenco, Ltd.	\$35.00	iii karii kariii kara araa araa araa ara	23669	
Vasari Country Club Master Association, Inc.	\$35.00	-05/17/01-	13663 11067 000	
Taylor Woodrow Community at Vasari, LLC	\$25.00		-01001023 *****35.[][]	
The Legacy Club, Inc.	\$35.00		, unassant 20 100	
The Legacy Cub at Alaqua Lakes, Ltd.	\$35.00			
Mirasol Cub, Inc.	\$35.00			
Addison Reserve Country Club, Inc.	\$35.00			
The Country Club at Mirasol Community Association, Inc.	\$35.00			
Capri at Mirasol Property Owners Association, Inc.	\$35.00	= 5 ≥ ≥	2	
Andalusia at Mirasol Property Owners Association, Inc.	\$35.00	AALI Noolo	<u> </u>	
Esperanza Property Owners Association, Inc.	\$35.00	LAHO	.	
Vizcaya at Mirasol Property Owners Association, Inc.	\$35.00	ASP I	<u>- 1</u>	
		SHC ~	1	
Thank you for your assistance and if you have any questions regarding the				
enclosed, please do not hesitate to contact me.		- '-	- 0	
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Sincerely,

TAYLOR WOODROW COMMUNITIES

Danette Weller Legal Assistant

/dw Enc.

cc: Marc I. Spencer

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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. Taylor Woodrow / Kenco, Ltd. Name of the limited partnership	<u> </u>
2. 9130194 3. A94000001335 Date of filing/registration in Florida Document number assigned	
4. The name of the registered agent and the registered office address as shown on the reconnection of State: Tohn R. Peshkin 7120 S. Beneva Rd Address Garasofa FL 34238 City, State and Zip	ords of the Florida
5. The name and address of the new registered agent and/or office: John R Teshkin Name 8430 Enterprise Circle, Stelloo Florida street address (P.O. Box not acceptable) Brodenton FL 34202 City, State and Zip 6. Such change(s) was/were authorized by the general partners. By TWKC, G.P. Signature of General Partner C. Alexander Braff, Vice President	FILED 2001 MAY 17 PM 5: 37 DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

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 obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Signature of Registered Agent

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