

APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP		FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS		FILED 97 MAY 12 PM 12:10	
DOCUMENT # A96000000698				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Name of Limited Partnership Overtown LIHTC Holdings, Ltd.				DO NOT WRITE IN THIS SPACE.	
2. Mailing Address P.O. Box 33037 Suite, Apt. #, etc. City & State Phoenix, AZ 85067-3037 Zip Country US		3. Principal Office Address c/o Thomson Muraro Razook & Hart, P.A. Suite, Apt. #, etc. One Southeast 3rd Ave., 17th Floor City & State Miami, FL 33131 Zip Country US		4. Date Formed or Registered To Do Business in Florida 4/10/96 5. FEI Number 65-0711951 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> <small>See 20A Edition of Rules required for a Certificate of Status.</small> 7. State or Country of Formation Florida	
8a. Capital Contributions as Shown on Record \$1,485,000.00		FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.			
8b. Amount of Capital Contributions in FLORIDA to date: \$3,185,103.00					
9. Name and Address of Current Registered Agent Timothy J. Norris c/o Thomson Muraro Razook & Hart, P.A. One Southeast Third Ave., 17th Floor Miami, FL 33131				10. If changed, new registered agent/office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
11. Names of General Partner(s)		Address of Each General Partner (Do NOT Use Post Office Box Numbers)		City, State and Zip Code	
Holiday Harbor Management Co.		4041 North Central Ave.		Phoenix, AZ 85012	
				11a. Registration Document Number K68590	
				100002181561--7 -05/16/97--01081--014 ***2800.00 ***1041.25	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.					
SIGNATURE _____ DATE 5/9/97					
Typed or Printed Name of General Partner Signing Form Edward J. Emery, Jr. Telephone Number 602-631-4127					

CR2E039 (1/97)