2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9600002209 1. Entity Name ESKO-ST. CLOUD AFFORDABLE HOUSING, LTD.					FILED	
Principal Place of Business 340 ROYAL POINCIANA WAY. SUITE 305 PALM BEACH FL 33480 Mailing Address 340 ROYAL POINCIANA WAY PALM BEACH FL 33480-409				TE 305	OO MAR 16 PM 2: 08 SECRETARY OF STATE	
2. Principal Place of Business 3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt, #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State	City & State		4. FEI Number 65-0798070 Applied For Not Applicable	
Zip	Country	Zip	Coun	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent	1		7: Name and Address of New Registered Agent	
HAND IN CUIPMO D FOO				Name		
HAMLIN, CURTIS D ESQ. HARLEE, PORGES, HAMLIN, KNOWLES, BALD 1205 MANATEE AVENUE WEST				Street Address (P.O. Box Number is Not Acceptable)		
8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Capital Co.					11. MAKE CHECK PAYABLE TO DEPT, OF STATE	
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 PARTNI		13.		ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS	P96000087402 ESKO AFFORDABLE HOUSING, INC. 305 ROYAL POINCIANA PLAZA		1	Į.	340 ROYAL POINCIANA WAY-SUITE 305	
CITY-ST-ZIP	PALM BEACH FL 33480		GHY	-ST-ZIP	HALM BEACH, FLORIDA 33480	
DOCUMENT# NAME			STRA	EET ADORESS		
STREET ADDRESS CITY - ST - ZIP			CITY	-ST-ZIP	<u> </u>	
DOCUMENT# NAME		~	STR	EET ADDRESS	9000001974391	
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DOCUMENT# NAME -			STR	EET ADDRESS		
STREET ADDRESS CITY - ST - ZIP			CITY	-ST-ZIP		
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 SIGNATURE: SIGNATURE: SIGNATURED JAMES C. JENENS 3 10 833-121						

VICE PRESIDENT OF THE GRENCHAL PARTIER OF ESKO-ST. CLOUD AFFORDABLE HOUSING, INC.