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LUCIO, MANDLER, CROLAND, BRONSTEIN, GARBETT, STIPHANY & MARTINEZ professional association attorneys at law 701 brickell avenue, suite 2000 MIAMI, FLORIDA 33131

> TELEPHONE (305) 579-0012 TELEFAX (305) 579-4722 E-MAIL ADDRESS: Jucman@ix.netcom.com

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*****35.00 *****35.00

December 22, 1998

Via UPS

Secretary of State Amendments/Limited Partnership Section 409 East Gaines Street Tallahassee, FL 32399

Re: Change of Registered Agent

To Whom It May Concern:

Enclosed are the manually-signed and two copies of the Partnership Statements of Change of Registered Agent and Registered Office for the following limited partnerships: Sunset Apartment Associates, Ltd., Park Plaza Associates, Ltd., Interbanc Real Estate Fund, Ltd., Harbor Inn of Coral Springs Associates, Ltd., Courts at Kendall Associates, Ltd., and Creative Developers, Ltd.

We have enclosed a check for \$35.00 for filing fees for each of the Statements of Change of Registered Agent and Registered Office. Please return copies of the filed Statements of Change of Registered Agent and Registered Office in the enclosed stamped self-addressed envelopes provided for your mailing convenience.

Thank you.

Name Availability	
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W. P. Verifyer	. .

Sincerely,

Rina Lyubkin



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.

1Harbour Isl	and Apartment Associates, LTD Name of the limited partnership		
2. <u>12/17/1997</u> Date of filing/regist	3. A9700002880	ligned	· · · · · · · · · · · · · · · ·
4. The name of the regis Department of State:	tered agent and the registered office address as shown on the Liebowitz, Sheldon	records of the Flo	1 · ·
-	Name 2600 E. Commercial Blvd. Suite 200		
-	Address Fort Lauderdale, FL 33308	· · · · · · · · · · · · · · · · · · ·	<pre>_ 1 ###################################</pre>
-	City, State and Zip		5
	s of the new registered agent and/or office:		Ó
	WIMC Registered Agents, Inc. Name	- · ·	·
	701 Brickell Ave., Suite 2000 Florida street address (P.O. Box <u>not</u> acceptable)	<u> </u>	
6. Such change(s) was/w	Miami, FL 33131 City, State and Zip rece authorized by the general partners.		
Signature of General Partner		2 -	ar gelanna anna 27 feann a
I hereby accept the appr	intment as registered against and garage to act in this cance	ity I further an	ica ta

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.

or Keyesteria Ace Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00

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