

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP FLORIDA DEPARTMENT OF STATE B96000000487		FILED 01 DEC 18 PM 5:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # B96000000487			
1. Name of Limited Partnership Worthington Apartments, Limited Partnership			
2. Principal Office Address 3190 Northeast Expwy Suite, Apt. #, etc. Suite 410 City & State Atlanta, GA Zip 30341 Country USA		3. Mailing Office Address 3190 Northeast Expwy Suite, Apt. #, etc. Suite 410 City & State Atlanta, GA Zip 30341 Country USA	
4. Date Formed or Registered To Do Business in Florida 12/18/96		5. FEI Number 58-2273761 Applied For: <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		7a. Capital Contributions as shown on Record: 1,000 7b. Amount of Capital Contributions in FLORIDA to date: 1,000	
8. Name and Address of Current Registered Agent Name: Corporation Service Company Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street Suite, Apt. #, Etc.: City: Tallahassee State: FL Zip Code: 32301			
9. 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.			
10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
DB General Partner, Inc.	3190 Northeast Expwy, #410	Atlanta, GA 30341	800004742798--6 12/28/01--01061--004 ****641.25 ****641.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. 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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 10/29/01

Typed or Printed Name of General Partner Signing Form STEVEN BERKMAN

Telephone Number 770-454-7325