

APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP			FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAY 19 AM 11:44		
DOCUMENT # B98000000141 1. Name of Limited Partnership W9/PHC Real Estate Limited Partnership 600 E Las Colinas Blvd., Suite 1900 Irving, TX 75039			DO NOT WRITE IN THIS SPACE		
2. Mailing Address 600 E Las Colinas Blvd Suite 1900 Irving, TX 75039 USA		3. Principal Office Address 600 E Las Colinas Blvd Suite 1900 Irving, TX 75039 USA		4. Date Formed or Registered To Do Business in Florida 3/6/98 5. EIN Number 75-2731930 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status 7. State or Country of Formation Delaware	
8a. Capital Contributions as Shown on Record \$5,000,000 8b. Amount of Capital Contributions in FLORIDA to date \$4,637,045		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): \$88.75 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.			
9. Name and Address of Current Registered Agent CT Corporation System 1200 South Pine Island Road Plantation, FL 33324			10. If changed, new registered agent/office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. 6000002885526--4 City 05/25/99--01046--004 ***1026.25 FL ***1026.25		
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) <i>Connie Bryan</i> DATE 5/19/99 CONNIE BRYAN SPECIAL ASSISTANT SECRETARY					
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) W9/PHC Gen-Par, Inc. PRIORITY - 500.00 AR 437.50 ARSUP 88.75 \$1026.25		Address of Each General Partner (Do NOT Use Post Office Box Numbers) 85 Broad Street New York, NY 10004		11a. Registration Document Number F98000001289 6000002885526--4 -05/25/99--01046--005 *****8.75 *****8.75	
REINSTATEMENT 1999 (B)(K) (C)(U)					
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 <i>Ron K. Barger</i> DATE MAY 18, 1999 Ron K Barger, Asst Secretary of the General Partner Typed or Printed Name of General Partner Signing Form Telephone Number					

CR2E039 (12/98)