## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B9800000215  1. Entity Name							
AIMCO FISHERMAN'S LANDING, L.P.				FILED			
Principal Place of Business 2000 S. COLORADO BLVD TOWER TWO SUITE 2-1000 DENVER CO 80222		Mailing Address 2000 S. COLORADO BLVD TOWER TWO SUITE 2-1000 DENVER CO 80222		R TWO	OI APR 27 PM 3: 53  SECRETARY OF STATE THOMASSEE TO DA	ı 1183: 8:11 :08:	
Principal Place of Business     3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State	City & State		QA=1AEC222	Applied For	
Zip	Country Zip		Coun	5. Certificate of Status Desired			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
CODDODA	TION CEDVICE COMBANY			Name			
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301							
				City	FL Zip Coo	de	
8. The above	e named entity submits this statement for	the purpose of changing it: re	egistere	ed office or register	red agent, or both, in the State of Florida.		
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NO 🗄	Registered	Agent s gnature required	when reinstating) DATE		
9. Capital Contributions as Shown on record. \$5,297,500.00 In FLORIDA to cate.				SEE REVERSE SIDE FOR FEE INFORMATION.			
	A GENERAL PARTNER TO	HAT IS A BUSINESS ET T	ITY M	UST BE REGIST	FERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.		
12.	GENERAL PARTNER		13.	,	ADDRESS CHANGES ONLY		
DOCUMENT ≠	500000000000			ET ADDRESS			
NAME STREET ADDRESS CITY-ST-ZIP	AIMCO HOLDINGS, L.P. 2000 S. COLORADO BLVD., TOWER TWO DENVER CO 80222		CITY	-ST-ZIP			
DOCUMENT / NAME			STRE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-	·ST-ZIP			
DOCUMENT <b>#</b> NAME			STRE	ET ADDRESS			
STREET ADORESS CITY-ST-ZIP			CITY-	ST-ZIP	800004221728- -05/17/01010260 ****526:25 *****52	3 )11 >= >= -	
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STREET ADDRESS	<b>,</b> ↑		CITY-	ST-ZIP			
indicated	certify that the information supplied with on this report is true and accurate and t wer or trustee empowered to execute this	hat my signature shall have the	e same	legal effect as if m	ction 119.07(3)(i), Florida Statutes. I further certify that the lade under oath; that I am a General Partner of the limited p	information partnership or	

by its GP AIMCO Holdings, LP, by its GP AIMCO Holdings

De orah Chesi Assistant Secy 4-25-01 (303) 7

(303) 757-8101 Daytime Phone #