2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Feb 03, 2004 08:00 AM Secretary of State

DOCUMENT # B9800000658 1. Entity Name STUDENT APARTMENT CONTRACTORS, LTD.							Secretary of State			
Principal Place of Business Mailing Address						<u> </u>		-		
				6363 WOODWAY, SUITE 1000 HOUSTON, TX 77057-1757				REKL ITIEL MULIK MUZIL KWI		
2. Principal Place of Business				3. Mailing Address						
Suite Apt #, etc			S	Suite, Apt. #, etc			01062004	Chg-LP	- CR2E003	1 (10/03)
City & State			С	City & State			4. FEI Number 76-0530	970		Applied For Not Applicable
Zip	Country		Z	ip	Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required			
Name and Address of Current Registered Agent						Name	7. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM						Street Address (P.O. Box Number is Not Acceptable)				
1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324						Direct Address (Address (F.O. Box Number is Not Acceptable)			
			City		City	FL Zip Code				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent										
SIGNATURE Signature Typed or printed name of registered agent and little if applicable DATE										
9. Capital Contributions as Shown on record. \$0.00 as Shown on record.						butions D				
	A C NOTE	SENERAL PARTNE General Partners	R THAT I	S A BUSINESS EN T be changed on t	ITITY M	UST BE REGIST	TERED AND AC	CTIVE WITH TH	IIS OFFICE.	er.
12.		GENERAL PART			13.	· · · · · · · · · · · · · · · · · · ·		ADDRESS CH	•	
DOCUMENT # NAME	F99000001400 DMC SAC, INC.				STRI	EET ADDRESS				
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14. Thereby 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 frue 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 AND TYPED OR PRINTED NAME OF SIGNING
RANDALL WISHANN CF

STAPLE CHECK HERE