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DOCUMENT # B9900000434			٥		FILED				
1. Entity Name TERRABROOK APOLLO BEACH, L.P.			. .		00 JUL	00 JUL -7 AM 9: 07			
			SFCRE	SECRETARY OF STATE					
Principal Place of Business 599 Lexington Avenue, #3800 New York, NY 10022 LB-6, Suite 15 Dallas, TX 75		500	-	TĂLLAHASSEE, FLORIDA					
Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FEI Number 75-2	2849295	\top	Applied For Not Applicable		
Zip	Country	Zip	Zip Country		5. Certificate of Status	Desired	\$8.75 Fee Req	Additional quired	
=	6. Name and Address of Current F	Registered Agent	<u>۔ . بے</u>	7. Name and Address of New Registered Agent					
CT Corporation System 1200 South Pine Island Road Plantation, FL 33324			Street Addres	(P.O. Box Number is Not Acceptable)					
			City	· · · · · · · · · · · · · · · · · · ·	FL Zip Code				
8. The above	named entity submits this statement for	the purpose of changing its	registere	L ed office or regis	stered agent, or both, in the	State of Florida.	<u> </u>		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
9. Capital Contributions 10. Amount of Capital Contributions 10,822,722.49 11 MAKE CHECK PAYABLE TO DEPT OF STATE SEE REVERSE SIDE FOR FEE INFORMATION									
	A GENERAL PARTNER TI NOTE: General Partners MA	HAT IS A BUSINESS EN	TITY M	UST BE REG	ISTERED AND ACTIVE				
12.	GENERAL PARTNER INFORMATION 13.		<u> </u>	ADDRESS CHANGES ONLY					
DOCUMENT # NAME	Terrabrook Apollo Beach GP, L.L.C.		ET ADDRESS	9000	003313 07/05/00-0	189	38 8		
STREET ADDRESS CITY-ST-ZIP	599 Lexington Avenue New York, NY 10022		CITY	-ST-ZIP		***2276.25			
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STREET ADDRESS CITY-ST-ZIP			CITY-	-ST-ZIP					
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 true 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 By: Terrabrook Apollo Beach GP, L.L.C., a Delaware limited liability company,									
SIGNATURE: 5/10/00 972-443-6000									