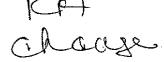
## F9300005657

| (Requestor's Name)                      |
|-----------------------------------------|
|                                         |
| (Address)                               |
|                                         |
| (Address)                               |
|                                         |
| (City/State/Zip/Phone #)                |
|                                         |
| PICK-UP WAIT MAIL                       |
|                                         |
| (Duningan Takiki Manga)                 |
| (Business Entity Name)                  |
|                                         |
| (Document Number)                       |
|                                         |
| Certified Copies Certificates of Status |
|                                         |
| Special Instructions to Filing Officer: |
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Office Use Only

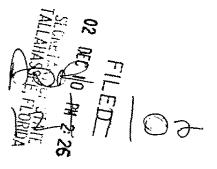


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12/10/02--01076--004 \*\*35.00





## **CT** CORPORATION

1

December 10, 2002

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5739770 SO Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

EQR-Village Green Vistas, Inc. (IL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley\_Mitchell@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| the undersigned corporation organized under the laws of the State of Illinois submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.                                                                                                                                                                                                                                           |
| 1. The name of the corporation : EQR-Village Green Vistas, Inc.                                                                                                                                                                                                                                                                                                                                                                                         |
| 2. The mailing address of the corporation : c/o L. Currie, 2 N. Riverside Plaza, #400, Chicago, IL 60606                                                                                                                                                                                                                                                                                                                                                |
| 3. Date of incorporation/qualification: 12/14/1993 Document number: F93000005657                                                                                                                                                                                                                                                                                                                                                                        |
| 4. The name and address of the current registered agent and office:                                                                                                                                                                                                                                                                                                                                                                                     |
| Lexis Document Services, inc.                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 3953 WW Kelley Rd.                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)                                                                                                                                                                                                                                                                                                                      |
| C T Corporation System  c/o C T Corporation System, 1200 South Pine Island Road,                                                                                                                                                                                                                                                                                                                                                                        |
| Plantation, Florida 33324                                                                                                                                                                                                                                                                                                                                                                                                                               |
| The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.                                                                                                                                                                                                                                                                                                       |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.  Dec. 10, 2002                                                                                                                                                                                                                                                                                                             |
| (Signature of an officer, chairman or vice chairman of the board) (Date)                                                                                                                                                                                                                                                                                                                                                                                |
| Paul Foreman, Secretary (Printed or typed name and title)                                                                                                                                                                                                                                                                                                                                                                                               |
| Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.  C. T. Corporation System  B: 12/10/02 |
| (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| If signing on behalf of an entity:  Christine M. Eastwine, Assistant Secretary                                                                                                                                                                                                                                                                                                                                                                          |
| (Typed or Printed Name) (Capacity)                                                                                                                                                                                                                                                                                                                                                                                                                      |

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

\* \* \* FILING FEE: \$35.00 \* \* \*

TALLAHASSEE, FL 32314