F940000003869

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CT CORPORATION

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-Sawgrass Cove 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 Tollahassee, 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,		
the Undersigned corporation organized under the laws of the submits the following statement in order to change its registe the State of Florida.	-	
1. The name of the corporation: EQR-Sawgrass Cove 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: 6/1/1994	Document number: F94000002869	
4. The name and address of the current registered agent and of	ffice:	
Lexis Document Services, inc.	\Pi_S S	
3953 WW Kelley Rd.		
Tallahassee, FL 32311		
5. The name and address of the new registered agent (if chang (P. O. Box Not Accepta		
C T Corporation System		
c/o C T Corporation System, 1200 South Pine Island I	Road,	
Plantation, Florida 33324	·	
The street address of its registered office and the street addreagent, as changed, will be identical.		
Such change was authorized by resolution duly adopted by it authorized by the board	s board of directors or by an officer so	
tal ton	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 servic corporation, I hereby accept the appointment as registered a I further agree to comply with the provisions of all statutes r performance of my duties, and I am familiar with and accept registered agent. C. I. Complation System	e of process for the above stated igent and agree to act in this capacity. elative to the proper and complete the obligation of my position as	
Bt: Carlo	12/10/02	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity: Christine M. Eastwine, Assistant Secretary		
(Typed or Printed Name)	(Capacity)	
* * * FILING FEE: \$35.00 * * *		

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314