2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **F94000003317**. SECURITY CAPITAL ATLANTIC MULTIFAMILY INCORPORAT Principal Place of Business Mailing Address 7777 MARKET CENTER AVE. 7670 S. CHESTER ST. C/O ARCHSTONE TAX DEPT. STE 100

FILED Feb 07, 2000 8:00 am Secretary of State 02-07-2000 90009 036 ***150.00

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2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address 7777 Market Center Avenue Suite, Apt. #. etc. C/O Archstone Tax Dept. City & State El Paso, TX		e					
					DO NOT WRITE	E IN THIS SE	PACE		
				4. F	T4-2709914	ļ		plied For of Applicable	
Zip	Country	79 9 12	Country USA	5. (Certificate of Status Desired		8.75 Add ee Require		
	6. Name and Address of Current R	egistered Agent		7. 1	lame and Address of New Re	gistered Ag	gent		
		······································	Name						
THE PRENTICE HALL CORPORATION SYSTEM, INC.			Ctract Address (DO Box Number is Not Association)						
1201 HAYS ST.			Street Address (P.O. Box Number is Not Acceptable)						
SUITE 105									
	AHASSEE FL 32301								
INCLUINOULL I COROUT			City			FL	Zip Cod	е	
O The chaus	named entity submits this statement for	the purpose of changing its r	agistored office of	r registered age	ant or both in the State of Flor	ida	<u> </u>		
o. The above i	named entity submits this statement for	the purpose of changing its in	sgistered diffice of	r registered age	ent, or both, in the State of Flor	iua.			
SIGNATURE -	Signature, typed or printed name of registered agent an	d title if applicable (NOTE:	Registered Agent signat	ture required when re	(instation)	DATE			
	algrature, typed of philled frame or registered agent an	This is approache. (NOTE:	Augustered Agent signal	tore reduired writing	T				
9. This corpor	ration is eligible to satisfy its Intangible		FILE NOW!!! FEE IS \$150.00		10. Election Campaign Fina	encina	\$5.0	O May Be	
T CC	equirement and elects to do so.	After MAY 1 200	0 Fee will be \$	550.00	Trust Fund Contribution			to Fees	
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath, that i am an officer of director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.