

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000002712

1. Corporation Name AMCO-GP, INC.

Principal Place of Business 1225 EYE STREET, NW SUITE 200 WASHINGTON DC 20005

Mailing Address 1225 EYE STREET, NW SUITE 200 WASHINGTON DC 20005

2. Principal Place of Business 21 1873 S Bellaire St Suite, Apt #, etc 22 Suite 1700 City & State 23 Denver, CO Zip 24 80222 Country 25 US

2a. Mailing Address 26 1873 S Bellaire St Suite, Apt #, etc 27 Suite 1700 City & State 28 Denver, CO Zip 29 80222 Country 30 US

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and term of application

(With Registered Agent's Signature, attach a copy of the Certificate of Incorporation)

1999

12. OFFICERS AND DIRECTORS

Table with 3 columns: Title, Name, Street Address, City-St-Zip. Rows include DCP CONSIDINE, TERRY; DV KOMPANIEZ, PETER K; SCFO MOREIN, LEEANN; V HEATH, PATRICIA; EVSC BONDER, JOEL F; EVP FOYE, PATRICK J.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

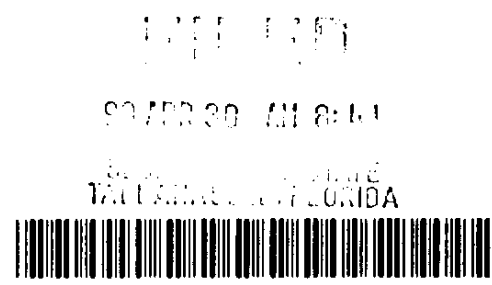
Table with 3 columns: Title, Name, Street Address, City-St-Zip. Includes handwritten entry for JOEL F. BONDER, Exec Vice Pres.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: [Handwritten Signature]

04-27-99

(303)757-8101



DO NOT WRITE IN THIS SPACE

- 3. Date Incorporated or Qualified: 06/06/1995
4. FEI Number: 84-1299715
5. Certificate of Status Desired: Applied For Not Applicable \$8.75 Additional Fee Required
6. Election Campaign Financing / Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes No
10. Name and Address of New Registered Agent



ACCOUNT NO. : 072100000032
 REFERENCE : 223151 5056396
 AUTHORIZATION : *John H. ...*
 COST LIMIT : \$ 165 *2*

ORDER DATE : April 29, 1999
 ORDER TIME : 11:53 AM
 ORDER NO. : 223151-010
 CUSTOMER NO: 5056396

REMIT

Please give original
 of the given date as file date.

CUSTOMER: Mr. Lynden L. Peter
 Aimco
 1225 Eye Street, Nw
 Suite 200
 Washington, DC 20005

Vertical stamp: SEARCHED, SERIALIZED, INDEXED, FILED

ANNUAL REPORT FILING

NAME: AIMCO-GP, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: CHRISTINE LILLICH

EXAMINER'S INITIALS: *B 4/30/99*