

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90179 050 \*\*\*150.00

**DOCUMENT # F97000000290**

1. Entity Name

**AIMCO PROPERTIES FINANCE CORP.****638551**

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1873 S BELLAIRE ST. STE. 1700 DENVER CO 80222 US	1873 S BELLAIRE ST. STE. 1700 DENVER CO 80222-4360 US

2. Principal Place of Business	3. Mailing Address
2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Suite 2-1000 City & State Denver, CO	2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Suite 2-1000 City & State Denver, CO

Zip	Country	Zip	Country
80222	USA	80222	USA

4. FEI Number	Applied For
84-1317499	Not Applicable

5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
Name
Street Address (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 registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
<input type="checkbox"/>		<input type="checkbox"/>	

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KOMPANIEZ, PETER K 1873 S BELLAIRE ST., STE. 1700 DENVER CO 80222 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPC BONDER, JOEL F 1873 S BELLAIRE ST., STE. 1700 DENVER CO 80222 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition EVP/Secretary 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP FOYE, PATRICK J 1873 SOUTH BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC CONSIDINE, TERRY 1873 SOUTH BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colorado Blvd., Tower Two, #2-1000 Denver, CO 80222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP and Treasurer Patricia K. Heath 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: By: Joel Bonder Joel Bonder, Secretary 4-6-00 (303) 757-8101  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #