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ADDISON PLACE APARTMENTS, INC

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 6, 2003

ADDISON PLACE APARTMENTS, INC 1 INVESCO REALTY ADVISORS, INC. 5400 LBJ FRWY LBX LINCOLN CENTRE - #700 DALLAS, TX 75240

SUBJECT: ADDISON PLACE APARTMENTS, INC

REF: F97000003826

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

Pursuant to the provisions of sections 607.6	0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
	rporation organized under the laws of the State of	
	registered office or registered agent, or both, in the State	
of Florida.		
1. The name of the corporation: Addison Place	Anartments, Inc	
		
2. The principal office address: 5400 LBJ Free	eway LB 2 Lincoln Centre	- ₹
Dallas, TX 75240		-
3. The mailing address (if different):		_
		2
4. Date of incorporation/qualification; 7/2	2 97 Document number: F97000003826	Mark .
5. The name and street address of the current Florida Department of State:	Document number: F97000003826 To registered agent and registered office on file with the tion Service Corporation	S OF TO
Corpora	tion Service Corporation	Sala Car
	120) Hays Street	Contract of the contract of th
Ta)	lahasee, FL 32301	OF STREET
changed):	registered agent (if changed) and /or registered office (if Corporation System	
	On position system	•
₽/0 C	T Corporation System	
(P.O. Vox or pe	orional mailbox NOT acceptable)	
1200 South Pine Isla	and Road, Plantation, Florids 33324	
The street address of its registered office and agent, as changed will be identical.	d the street address of the business office of its registered	
Devis Ottober	uly adopted by its board of directors or by an officer so las been notified in writing of the change. Teni Atteberry, Vice President	
Signature of his officer, observation of vice characters of the bound)		
l hereby accept the appointment as registere I further agree to comply with the provisions performance of my duties, and I am familiar registered agent. Or, if this document is bei office address. I hereby confirm that the con	ed agent and agree to act in this capacity. s of all statutes relative to the proper and complete with and accept the obligation of my position as ng filed merely to reflect a change in the registered poration has been notified in writing of this change.	
M Torposation System	fichael E. Jones	
By: (Bigniture of Registered Agent)	ssistant Secretary 11-5-03	
	(Date)	
If signing on behalf of an emity: Michael E. James	Assistant Socretary	
(Typed or Printed Name)	(Capacity)	

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

Make checks payable to Florida Department of State and Mail to: Division of Corporations, F.O. Box 6327, Talianasses, PL 32314