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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F97000005653 (7)**

1. Corporation Name
YCP ALHAMBRA G.P., INC.

Principal Place of Business	Mailing Address
% ERE YARMOUTH 950 E. PACES FERRY RD., STE. 3210 ATLANTA GA 30326	% ERE YARMOUTH 950 E. PACES FERRY RD., STE. 3210 ATLANTA GA 30326

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3424 Peachtree Rd, NE	2a. Mailing Address 26 3424 Peachtree Rd, NE	3. Date Incorporated or Qualified 10/27/1997	
Suite, Apt. #, etc. 22 Suite 800	Suite, Apt. #, etc. 27 Suite 800	4. FEI Number 58-2349883	Applied For ☐ Not Applicable ☐
City & State 23 Atlanta, GA	City & State 28 Atlanta, GA	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 30326 / 25 USA	Zip / Country 29 30326 / 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CP FRIEDMAN, ANDREW R 950 E. PACES FERRY RD. ATLANTA GA 30326	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DP Andrew R. Friedman 3424 Peachtree Rd, NE, Suite 800 Atlanta, GA 30326	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, KENT R 950 E. PACES FERRY RD. ATLANTA GA 30326	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D. Amber B. Degnan 3424 Peachtree Rd, NE, Suite 800 Atlanta, GA 30326	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT GRUBENHOFF, STEVEN G 950 E. PACES FERRY RD. ATLANTA GA 30326	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Paul J. Dolinoy 3424 Peachtree Rd, NE, Suite 800 Atlanta, GA 30326	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MILLER, DONALD A 950 E. PACES FERRY RD. ATLANTA GA 30326	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ANDERSON, MICHAEL B 950 E. PACES FERRY RD. ATLANTA GA 30326	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	S Douglas L. Brown 3424 Peachtree Rd, NE, Suite 800 Atlanta, GA 30326	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V REDDIC, CARROLL A IV 950 E. PACES FERRY RD. ATLANTA GA 30326	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	VP Carroll A. Reddic, IV 3424 Peachtree Rd, NE, Suite 800 Atlanta, GA 30326	☒ Change ☐ Addition

CR2E034 (10/97)

14. 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 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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Douglas L. Brown 3-19-98 404-848-8614