2002 UNIFORM BUSINESS REPORT (UBR)

May 19, 2002 8:00 am § Secretary of State DOCUMENT # J46939 1. Entity Name 05-19-2002 90258 023 ***158.75 PARK PLACE APARTMENTS, INC. Principal Place of Business Mailing Address 4851 KELLER SPRINGS RD 4851 KELLER SPRINGS RD 360979 222 ADDISON TX 75001-5928 ADDISON TX 75001-5928 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 75-2143330 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent EMMANUEL, PATRICK G. Street Address (P.O. Box Number is Not Acceptable) 30 S. SPRING ST PENSACOLA FL 32501 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE CR2E034 (9/01) X Change ☐ Addition NAME LITOFF, ELIOT NAME STREET ADDRESS STREET ADDRESS 4851 KELLER SPRINGS RD #222 CITY-ST-ZIP ADDISON TX 75001-5928 CITY-ST-7/P 75001-6261 Addison, TX TITLE ☐ Delete TITLE ☐ Change ☐ Addition STD NAME LITOFF, HAROLD NAME STREET ADDRESS STREET ADDRESS 84 SHIP STREET, UNIT F-1 EAST CITY-ST-ZIP CITY-ST-ZIP PROVIDENCE RI 02903 TITLE ☐ Delete TITLE X Change ☐ Addition A\$ NAME NAME LITOFF, CAROL G. STREET-ADDRESS STREET ADDRESS 4851 KELLER SPRINGS RD 222 CITY-ST-ZIP CITY-ST-ZIP Addison, 75001-6261 ADDISON TX 75001-5928 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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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:

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FILED