L0/00000000

3225 Aviation Avenue = PH Suite = Coconut Grove, FL 33133 = Tel: 305.860.8188 = Fax: 305.860.8308 = www.HousingTransforup.com

FILED PM 12: 16

July 11, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Chapel Trust Associates, LLC

2002 Uniform Business Report

L01000002000

600006417166---7 -07/15/02--01091--005 ******25.00 ******25.00

Dear Sirs:

Attached please find "Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company" for the above project. We are also enclosing Check # 1009 for \$25.00, which is the fee for filing this change.

Thank you.

Very truly yours,

Kenneth G. Cassel Chief Operating Officer

Enclosures

/cs

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the limited liability company is: Chapel Trust Associates, LLC 2. The mailing address of the limited liability company is: 3225 Aviation Avenue, Suite 700 Coconut Grove, FL 33133 L01000002000 Feb. 6, 2001 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Clinton Communities, LJC Name 3225 Aviation Avenue, Suite 700 Address Coconut Grove, FL 33133 City, State and Zip 6. The name and address of the new registered agent and/or office: Housing Trust Group of Florida. 3225 Aviation Avenue, Suite 700 Florida street address (P.O. Box NOT acceptable) Coconut Grove 33133 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) STEWART MARCUS (Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

(Signature of Registered Agent)

FILING FEE: \$25.00