2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000006389

1. Entity Name 22 APARTMENTS, LLC

FILED Jan 16, 2004 08:00 AM Secretary of State

Principal Place of Business 12400 WILSHIRE BLVD., STE, 1450 Mailing Address 12400 WILSHIRE BLVD., STE, 1450

LOS ANGELES, CA 90025

LOS ANGELES, CA 90025



DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For
04-3609830	 	Not Applicable
E Cartificate of Status Dosired	 \$5.00	Additional

CR2E083 (10/03)

Fee Required

6. Name and Address of Current Registered Agent DO NOT WRITE

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

3. 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. I am familiar with, and accept the obligations of registered agent.

Filing Fee is \$50.00 Due by May 1, 2004

Signature, typed or printed name of registered abent and title if applicable

SIGNATURE.

CITY-ST-ZIP

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	(NOTE, Registered A	beut arbustrie :	required when remetati	ing) Mass/Lase, Jin Tue	DATE		• • •	<u>.</u>
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IN THIS SPACE

01062004 No Chg-LLC

5. Certificate of Status Desired

\$.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NATIONAL HOMES TRUST VII, INC. 12400 WILSHIRE BLVD #1450 LOS ANGELES, CA 90025	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(7), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE: MEITZER DAYED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE