File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. 100001968 - Entre 1150 LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 99 AFR 12 PM 4: 40 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE **DOCUMENT #** 198000001968 Name and Mailing Address
I Limited Liability Company TUDOR APARTMENTS, L.C. 1a. Principal Place of Business Address. C/O CRESCENT MANOR OFFICE C/O CRESCENT MANOR OFFICE 1501 CRESCENT CIRCLE 1501 CRESCENT CIRCLE LAKE PARK FL 33403 LAKE PARK FL 33403 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 2a. Mailino Address 09/24/1998 \mathbf{FL} Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 65-0882582 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zφ S8 75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office KTCLS REGISTERED AGE, NT CORPORATION 100_SOUTHEAST 2ND STREET, SULTE 2800 Street Address (P.O. Box Number is Not Acceptable) MTAMI-FL-33131 Zip Code 3346-ス 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. DATE SIGNATURE (Registered Agent Accepting Applicationals) (Italife, Registered Agent superforce part Twice of this ja-10. Title City, State and Zip Code Managing Members/Managers **Business Street Address** C/O CRESCENT MAILOR OFFICE 1501 CRESCENT CIRCLE LAKE PARK FL 33463 MGR GERSON, THEODORE F 6d0002844826---\$ -04/20/99--01036--013 ****188.75 ****198.75 11. I do 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 is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver outrustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: //