212-408-5000 Daytime Phone #

1/29/01 Date

## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L9900001228  1. Entity Name HIGH POINT CLUB APARTMENTS, LLC					<b>=</b> 10		
					FILED		
C/O SENTINE	ce of Business EL REAL ESTATE CORPORATION /ENUE, 26TH FLOOR IY 10103 -	Mailing Address C/O SENTINEL REAL ESTATE CORPORATION 666 FIFTH AVENUE, 26TH FLOOR NEW YORK NY 10103		ON	OIFEB 26 AM 9: 33  SECRETARY OF STATE TALLAHASSEE: FLORIDA		
•	Place of Business 1251 of the Americas #.etc.	3. Mailing Address 1251  Avenue of the Americas Suite, Apt. #, etc.		cas	DO NOT WRITE IN THIS SPACE		
City & Stat	Floor e York. NY	36th Floor City & State New York, NY		4.	FEI Number 65-09133	_ <del></del>	Applied For Not Applicable
Zip 100	20 Country USA	<sup>Zip</sup> 10020	Country US	A	Certificate of Status Desire	Fee Re	O Additional equired
	6. Name and Address of Current F	Registered Agent	Name		Name and Address of New	w Registered Agent	·
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				Street Address (P.O. Box Number is Not Acceptable)			
					FL Zip Code		
SIGNATURE	Signature, typed or printed name of registered agent ar		W!!! FEE IS	•		DATE	
9.	MANAGING MEMBE	RS/MEMBERS	10.		ADDITION	NS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SENTINEL REAL ESTATE CORPOR 666 FIFTH AVENUE, 26TH FLOOF NEW YORK NY 10103	Delete	TITLE NAME	1	venue of the	Americas	ange Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Chi	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3	800003 -02/2 ****	170101085.	ange Addition 008 **50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3		□ Cha	ange 🗀 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			√ □ Cha	ange Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	ange Addition
indicated	rertify that the information supplied with to on this report is true and accurate and the company or the receiver or trustee of the company of the receiver or trustee of the company of the receiver or trustee of the company of the	nat my signature shall have th empowered to execute this re	ie same legal ef	fect as if made ι	under oath; that I am a mar	s. I further certify that aging member or ma	the information nager of the

NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 1-Baron, Assistant Secretary