2001 UNIFORM BUSINESS REPORT (UBR)

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

DOCUMENT # M0000001350						FIL	ED	W	3/200	ಜ ≱
HIDDEN F	PALMS ALF, L.L.C.				,	01 MAR 26			127	
Principal Plac	e of Business	Mailing Address	Mailing Address			┪				
C/O GREYSTONE & COMPANY 152 W. 57TH STREET. 60TH FLOOR NEW YORK NY 10019		C/O GREYSTONE & COMPANY 152 W. 57TH STREET. 60TH FLOOR NEW YORK NY 10019		SECRETARY OF STATE TALLAHASSEE FLORIDA						
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					7
				tor	10 11 10 00 0			t Applicable	-	
Zip Country		Zip	Coun	Country		5. Certificate of Status Desired Specificate of Status Desired Fee Required				
	6. Name and Address of Curr	ent Registered Agent		Name	7. Nam	e and Address of New Regis	tered Age	<u>nt</u>		1
C T CORPORATION SYSTEM				Street Address	dress (P.O. Box Number is Not Acceptable)					
	TH PINE ISLAND ROAD				· · · · · · · · · · · · · · · · · · ·					1
PLANIAII	ON FL 33324			City	FL Zip Code					1
8. The above	named entity submits this statemen	nt for the purpose of changing it	s registere	ed office or régiste	red agent,	or both, in the State of Florida	· · · · · · · · · · · · · · · · · · ·			
SIGNATURE .				<u></u>			DATE			
	Signature, typed or printed name of registered a			d Agent signature require	d when reinstati	ng)	DAIE	<u></u>		1
				FEE IS \$50.00 o Department o	of State	·				
9.	MANAGING ME	MBERS/MEMBERS	10.	-		ADDITIONS/CH/] Change	Addition	ģ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RECTOR HOLDING CORP. 152 W. 57TH STREET, 60TH I NEW YORK NY 10019.	□ Delete	nami Stre					·		CR2E083 (11/00)
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11. I hereby	certify that the information supplied to this report is true and accurate bility company or the receiver or true Palms ALF. L.C. ephen Rosenberg, Pr	and that my planeture chall have	a tha came	a local offect as if	mada unda	rooth that I am a managing.	her certify member or	that the in manage	nformation r of the	

3-5-01

212-649-9700 Daytime Phone #