2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000340

Entity Name: NHPMN MANAGEMENT, LLC

FILED Feb 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4582 S ULSTER ST PKWY **SUITE 1100** DENVER, CO 80237 **New Mailing Address: Current Mailing Address:** 4582 S ULSTER ST PKWY **SUITE 1100** DENVER, CO 80237 FEI Number: 43-1987682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete AIMCO/BETHESDA HOLDI, NGS, INC. Name: Name: 4582 S ULSTER ST PKWY SUITE 1100 Address: Address: City-St-Zip: DENVER, CO 80237 US City-St-Zip: Title: MGR Title: () Delete () Change () Addition COWDREY, THOMAS O III Name: Name: Address: 12195 HIGHWAY 92, SUITE 114, BOX 300 Address: City-St-Zip: WOODSTOCK, GA 30188 US City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition CAPPAERT, DONALD L CAPPAERT, DONALD L Name: Name: Address: 6690 CARDINAL CIRCLE Address: 6690 CARDINAL CIRCLE City-St-Zip: MAPLE GROVE, MN 55369 City-St-Zip: MAPLE GROVE, MN 55369 US () Delete Title: MGR Title: MGR (X) Change () Addition Name: SKOCZYLAS, RICHARD Name: SKOCZYLAS, RICHARD 301 OXFORD VELLEY ROAD, STE. 1801, 2ND FL 301 OXFORD VELLEY ROAD, STE. 1801, 2ND FL Address: Address: City-St-Zip: YARDLEY, PA 19067 City-St-Zip: YARDLEY, PA 19067 US Title: MGR () Delete Title: MGR (X) Change () Addition DAWSON, BARBARA BECK, CAROLYN Name: Name: 1200 TORREY PINES DRIVE, #210 2111 UNIVERSITY PARK DRIVE SUITE 100 Address: Address: City-St-Zip: LAS VEGAS, NV 89146 City-St-Zip: OKEMOS, MI 48864 US Title: () Delete Title: (X) Change () Addition GILL, H. LEON GILL. H. LEON Name: Name: Address: 3400 PORTLAND PLAZA Address: 3400 PORTLAND PLAZA LOUISVILLE, KY 40212 LOUISVILLE, KY 40212 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DEBRA A MCDONALD AS 02/10/2009