

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003101

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** ENCLAVE APARTMENTS PROPERTY, LLC

**Current Principal Place of Business:**

2550 M STREET NW  
C/O PATTON BOGGS LLP  
WASHINGTON, DC 20037 US

**New Principal Place of Business:**

230 PARK AVENUE  
C/O CLARION PARTNERS  
NEW YORK, NY 10169 US

**Current Mailing Address:**

2550 M STREET NW  
C/O PATTON BOGGS LLP  
WASHINGTON, DC 20037 US

**New Mailing Address:**

230 PARK AVENUE  
C/O CLARION PARTNERS  
NEW YORK, NY 10169 US

**FEI Number:** 27-3018087

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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:**

Title: MGR  
Name: JACKSONVILLE ENCLAVE APARTMENTS, L.P.  
Address: C/O CLARION PARTNERS 230 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10169 US

Title: MGR  
Name: JRH PROPERTIES I, LLC C/O ING CLARION PART  
Address: C/O CLARION PARTNERS 230 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10169 US

I hereby 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: JAMES FACOMPRES

VP

05/01/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date