File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS nn 1797, 23 - EU 51: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE **DOCUMENT** # M96000000397 1a. Principal Place of Business Address AP CRTI LANDCO LLC C/O APOLLO REAL ESTATE ADVISORS, L.P. C/O APOLLO REAL ESTATE ADVIS 2 MANHATTANVILLE ROAD 2 MANHATTANVILLE ROAD PURCHASE NY 10577 PURCHASE NY 10577 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 10/10/1996 DE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 13-3970452 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 04/13/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name THE PRENTICE-HALL CORPORATION SYSTEM, Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET eccoorsazaece----TALLAHASSEE FL 32301 -04/30/99---01147---007 ****188.75 ****188.75 Zip Code 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. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE (Registrated Agent Accepting Appointment) (NOTE Registered Agent's grature to quied where installing) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM AP CRTI HOLDINGS COR, 2 MANHATTANVILLE ROAD PURCHASE NY 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 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, and that my name appears in Block 10, or on an

Ronald J. Solotruk

914-694-8000

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