

FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

FILED

97 FEB 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company	DOCUMENT # M96000000455
AMERICA FIRST PROPERTIES MANAGEMENT COMPAN Y L.L.C. 1004 FARNAM STREET SUITE 400 OMAHA NE 68102	

1a. Principal Place of Business Address
1004 FARNAM STREET SUITE 400 OMAHA NE 68102

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

3. Date Organized or Qualified	3a. State of Formation
11/19/1996	DE
4. FEI Number	☐ Applied For
47-0794118	☐ Not Applicable
NOT APPLICABLE	
5. Date of Last Report	6. Certificate of Status Desired
	☐ SB 2007-01 (Annual Fee Required)

7. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM 1200 PINE ISLAND ROAD PLANTATION FL 33321

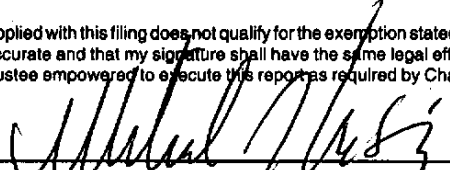
8. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, etc.	
City	Zip Code
FL	

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 _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	AMERICA FIRST COMPAN,	1004 FARNAM STREET	OMAHA NE
			300002086053--9 -02/13/97--01003--006 ****203.75 ****203.75
			B2-11-97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 attachment with an address.

SIGNATURE:  1/24/97 (402) 444-1630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #