

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	--

FILED
APR 20 PM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 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

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

3. Date Organized or Qualified 11/19/1996	3a. State of Formation DE
4. FEI Number 47-0794118	☐ Applied For ☐ Not Applicable
5. Date of Last Report 05/01/1998	6. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

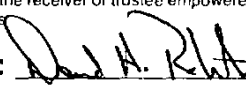
7. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 PINE ISLAND ROAD PLANTATION FL 33321

8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City 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 _____
-----------------	------------

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	AMERICA FIRST COMPAN,	1004 FARNAM STREET	OMAHA NE

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 attachment with an address:
SIGNATURE:  DAVID H Roberts, VP Finance 5/24/99 (402) 444-1630