

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
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FILED
 99 MAR 12 PM 1:24
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILING FEE	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company DOCUMENT # M97000000516 APARTMENT COMMUNITY REALTY LLC 600 EAST LAS COLINAS BLVD., SUITE 1800 IRVING TX 75039
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1a. Principal Place of Business Address 600 EAST LAS COLINAS BLVD., IRVING TX 75039

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
08/19/1997	DE
4. FEI Number	<input type="checkbox"/> Applied For
75-2717042	<input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired
03/16/1998	\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301
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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 _____
(Reg. Serv. Agent Accepting Appointment) (NOTE: Registered Agent Signature required when filing annual report)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	JPI LIFESTYLE APARTMEN	600 EAST LAS COLINAS BLVD.	IRVING TX
MGRM	JPI LIFESTYLE MANAGEME	600 EAST LAS COLINAS BLVD.	IRVING TX

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. 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: Joe Ratliff Vice-President/Taxation 2/22/99 972-556-1700
SIGNATURE AND TITLE OF OFFICER OR MANAGER REQUIRED. MANAGING MEMBER MUST SIGN AND PRINT NAME AND ADDRESS.