File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris FRED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS COMPR 25 PK 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE **DOCUMENT # M97000000876** 1a. Principal Place of Business Address AP-GP WILLMAX III LLC 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 12/22/1997 DE Suite, Apt #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State NOT APPLICABLE Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country \$8.75 Additional Fee Required 04/29/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name THE PRENTICE-HALL CORPORATION SYSTEM, 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 Suite, Apt. #, etc. 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Age it Avcepting Appointment). (NOTE: Registered Agent signal ire responsitivitionship og). 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code KRONUS PROPERTY III, I 2 MANHATTANVILLE RD. MGR PURCHASE NY mhono2859790----0\$/03/39--01012--018_ ****188.75 ****188.73

SIGNATURE: Indifficulty Ronald J. Solotruk 4-8-99 914-694-8000

SIGNATURE: SIGNATURE: Ronald J. Solotruk 4-8-99 914-694-8000

SIGNATURE: RONALD RONAL

attachment with an address.

11. Ido 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