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** 99 MAR 12 PM 1: 25 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SCURLIAKT OF STATE \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT # M98000001113** 1a. Principal Place of Business Address 3365 ENTERPRISE AVENUE INVESTORS LLC % ALLEGIS REALTY INVESTORS LLC % ALLEGIS REALTY INVESTORS & 242 TRUMBULL STREET 242 TRUMBULL STREET HARTFORD CT 06103 HARTFORD CT 06103 2 Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation 09/29/1998 DE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 06-1526171 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Country Zip \$8.75 Additional Fee Required X 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office CORPORATE SERVICE CO, MPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 Suite, Apt. #, etc City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited hability 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 Ages | Accepting Appointment) (NOTE Registered Ages I signature required when recest them 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code HARTFORD CT 06103 MGR ALLEGIS REALTY INVES, 242 TRUMBULL STREET INVESTORS LLC 200002814532: ---03/22/99--01158--015 ****197.50 ****197.50

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (ii), 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 attempt of 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 attempt of 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 attempt of 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 attempt of 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 attempt of 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 attempt of 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 attempt of 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 attempt of 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 attempt of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and the receiver of the receiver or trustee empowered to execute the receiver of the receiver of

REALTY INVESTORS LLC, Its Manager

attachment with an address. ALLEGIS

SIGNATURE: By: