

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000000316

1. Entity Name
LAKESIDE NORTH, L.L.C.

Principal Place of Business
ATTN: OFFICE OF THE GENERAL COUNSEL
7200 WISCONSIN AVENUE, SUITE 1100
BETHESDA MD 20814

Mailing Address
ATTN: OFFICE OF THE GENERAL COUNSEL
7200 WISCONSIN AVENUE, SUITE 1100
BETHESDA MD 20814

FILED

01 MAY -1 PM 5:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2000 S. Colo Blvd
Suite, Apt. #, etc.
Tower Two #2-1000

3. Mailing Address
2000 S. Colo Blvd
Suite, Apt. #, etc.
Tower Two #2-1000

City & State
Denver, CO

City & State
Denver, CO

4. FEI Number 52-2167766

Applied For
Not Applicable

Zip 80222

Country USA

Zip 80222

Country USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ZICKLER, LEO E 7200 WISCONSIN AVE., #1100 BETHESDA MD 20814	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LAVIN, FRANK P 7200 WISCONSIN AVE., #1100 BETHESDA MD 20814	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DOWNING, ROBERT B 7200 WISCONSIN AVE., #1100 BETHESDA MD 20814	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR Oxford Realty Financial Group, Inc. 2000 S. Colo Blvd., Tower Two #2-1000 Denver, CO 80222	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR AIMCO Properties, L.P. 2000 S. Colo Blvd., Tower Two #2-1000 Denver, CO 80222	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100004287521-0 -05/22/01--01083--002 *****50.00 *****50.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I 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 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.

Lakeside North, L.L.C. by its managing member, Oxford Realty Financial Group, Inc.

SIGNATURE: By: Deborah Chesel Asst. Secy 4-27-01 (303) 757-8101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)