FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000074593 (2)**

1. Corporation Name

GMN AFFORDABLE HOUSING PARTNER XV, INC.

Principal Place of Business

1460 BRICKELL AVE.
SUITE 309
MIAMI FL 33131

Mailing Address

1460 BRICKELL AVE.
SUITE 309
MIAMI FL 33131

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 10/11/1994

3a. Date of Last Report: 05/01/1995

4. FEI Number: ~~APPLIED FOR~~ ~~XXXXXXXXX~~ 65-0679010 — [X] Applied For — Not Applicable

5. Certificate of Status Desired [X] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: GONZALO DE RAMON
82 Street Address (P.O. Box Number is Not Acceptable): 1460 BRICKELL AVE # 309
83
84 City: MIAMI, FL — FL — 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Gonzalo De Ramon*
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	POLLACK, ROBERT W JR	1460 BRICKELL AVE 309	MIAMI FL 33131	[X]
DV	DOMINGUEZ, AGUSTIN	1460 BRICKELL AVE 309	MIAMI FL 33131	[ ]
DV	ANDERSON, EUGENIA	1460 BRICKELL AVE 309	MIAMI FL 33131	[ ]
				[ ]
				[ ]
				[ ]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

#	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
1	VD	RUSSELL A. SIBLEY	1460 BRICKELL AVE. #309	MIAMI, FL. 33131	[ ]	[X]
2	PD	DOMINGUEZ, AGUSTIN	1460 BRICKELL AVE. #309	MIAMI, FL. 33131	[X]	[ ]
3	–				[ ]	[ ]
4					[ ]	[ ]
5					[ ]	[ ]
6					[ ]	[ ]

800001840048
-05/28/96--01018--001
***2853.75

7/26/97

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *A. Dominguez, Pres.* AGUSTIN DOMINGUEZ, PRESIDENT — 4-24-96 — (305)374-5503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)