

# FILING TRANSMITTAL FORM

### TO:

Division of Corporations Florida Department of State 409 E. Gaines Street (Zip Code 32399) P. O. Box 6327 Tallahassee, FL 32314

FR: Gary Sherman DATE: August 27, 2001

RE: Addison Park Apartments, Inc. Andover Place North, Inc. Egrets Apartments, Inc. Glacier/Versant Corp. Gulf Gate Apartments, Inc. Indian River Apartments, Inc. LT By the Sea, Inc. Monte Vista Orlando, Inc. Prospect Park Realty Corp. Providence Place Apartments, Inc. Vinridge Landing Inc. West Port St. Petersburg, Inc. SB Partners Real Estate Corporation Sentinel Realty Advisors Corporation Knickerbocker Propreties, Inc. XX Sentinel Realty Corp. II Sentinel Realty Corp. III Sentinel Realty Corp. IV

### **REFERENCE: 00300S**

#### PLEASE FILE THE ATTACHED

#### Change of Registered Agent

Check for \$35 is enclosed.

## PLEASE OBTAIN THE FOLLOWING EVIDENCE:

One Filed stamped copy

RA(RO Change



FILED OI SEP -4 MMII: 47 SECRETARY OF STATE RECRETARY OF STATE

S. PAYNE SEP 1 1 2001



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Please call Gary Sherman at 800-300-5067 if there are any problems with this filing.

Please Return Evidence By Regular Mail to: Gary Sherman CONTINENTAL CORPORATE SERVICES, INC. 189 FRANKLIN AVENUE, SUITE 1 NUTLEY, NJ 07110 PHONE: 800-300-5067 FAX: 973-542-0313

Thank you.

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation : Indian River Apartments, Inc.

2. The mailing address of the corporation : 1251 Avenue of the Americas, New York, NY 10020

3. Date of incorporation/qualification: <u>August 15, 1995</u> Document number: <u>P95000062921</u>

4. The name and address of the current registered agent and office:

C T Corporation System

1200 S. Pine Island Road

Plantation, FL 33324

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)

NRAI Services, Inc.

526 E. Park Avenue

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

Connell J. Watters, Secretary

the State of Florida.

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

NRAI Serviçes, Inc.	
Dullan	 8
(Signature of Registered Agent)	 /
If signing on behalf of an entity:	

It signing or behalf of an entity:

Gary Sherman, Assistant Secretary

(Typed or Printed Name)

(Capacity)

10

(Date)

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

\* \* \* FILING FEE: \$35.00 \* \* \*

TALLAHASSEE, FL 32314