

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000062362

FILED
Apr 30, 2003
Secretary of State

Entity Name: AMERICAN APARTMENT COMMUNITIES VICTORIA POINTE, INC.

Current Principal Place of Business:

1177 S.E. 3RD AVENUE
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

AMERICAN APT COMMUNITIES
501 DERBY CREEK ROAD #11
LEXINGTON, KY 40509

New Mailing Address:

KLINGBEIL CAPITAL MANAGEMENT, LTD.
501 DERBY CREEK ROAD #11
LEXINGTON, KY 40509

FEI Number: 65-0851429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WACHS, JEFFREY S ESQ
1177 S.E. 3RD AVENUE
FORT LAUDERDALE, FL 33316

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CALLARD, JAMES H
Address: 21 W BROAD ST 11TH FLOOR
City-St-Zip: COLUMBUS, OH 43215

Title: VPSD () Delete
Name: NICKERSON, GEORGE R
Address: 21 W BROAD ST 11TH FLOOR
City-St-Zip: COLUMBUS, OH 43215

Title: D () Delete
Name: KLINGBEIL-WEIS, KRISTEN
Address: 21 W BROAD ST 11TH FLOOR
City-St-Zip: COLUMBUS, OH 43215

Title: VPTD (X) Delete
Name: SCHECHTER, RICHARD A
Address: 2439 APPALOOSA TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: VD (X) Delete
Name: MEAD, SHEILA
Address: 2439 APPALOOSA TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: AT () Delete
Name: MONTGOMERY, PAUL
Address: 501 DARBY CREEK RD STE 11
City-St-Zip: LEXINGTON, KY 40509

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL MONTGOMERY

AT

04/30/2003

Electronic Signature of Signing Officer or Director

Date