

FILING TRANSMITTAL FORM

000004568750-

-09/04/01--01123--011

*****35.00 *****35.00

TO:

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

Gary Sherman FR: 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

Corrected Soc. #- OK'D BOR CCS



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

the undersigr	o the provisions of sections 607.0502, 617.0502, 607.1508, or 617. gned corporation organized under the laws of the State of Florida	
	following statement in order to change its registered office or regis	tered agent, or both, in
the State of F 1. The name	e of the corporation: Prospect Park Realty Corp.	
2. The mailin	ng address of the corporation: 1251 Avenue of the Americas, New York	k, NY 10020
3. Date of inc	ncorporation/qualification: March 31, 1999 Document numb	er: P99000029629
4. The name a	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.	ing the second s
	526 E. Park Avenue	
	Tallahassee, FL 32301	
The street add agent, as chan	ldress of its registered office and the street address of the business onged, will be identical.	office of its registered
Such change vauthorized by	was authorized by resolution duly adopted by its board of directors vithe board.	or by an officer so
ËL	llim Baron 8	1/10/01 \$2 9
(Signatur	ure of an officer, chairman or vice chairman of the board)	(Date) SEP T
Ellyn Baron, Ass	Ssistant Secretary (Printed or typed name and title)	755 - E
Having been n corporation, I further agree performance o registered age NRAI Services	named as registered agent and to accept service of process for the I hereby accept the appointment as registered agent and agree to age to comply with the provisions of all statutes relative to the proper of my duties, and I am familiar with and accept the obligation of ment.	above stated act in this capacity. and complete by position as
/	/ July Sun 8/27	101
	(Date)	
If signing on beha	<i>,</i>	· · · · · · · · · · · · · · · · · · ·
	n, Assistant Secretary (Typed or Printed Name) (Canacity)	
	(Capacity)	

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

P.O. Box 6327

TALLAHASSEE, FL 32314

CR2E045(9/00)

DIVISION OF CORPORATIONS