2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # F03000004917

1. Entity Name
ST. JOHN'S COMMONS OWNER CORP

Principal Place of Business	Mailing Address
C/O PREI-ATTN: J. MULFORD 8 CAMPUS DRIVE PARSIPPANY, NJ 07054	C/O PREI-ATTN: J. MULFORD 8 CAMPUS DRIVE PARSIPPANY, NJ 07054

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02062006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1047630
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	RUSSELL, DAVID
STREET ADDRESS	CREDIT SUISSE FIRST BOSTON, 11 MADISON AVE
CITY-ST-ZIP	NEW YORK, NY 10010
TITLE	D
NAME	STROSE, MICHAEL
STREET ADDRESS	10 GENESSO TRAIL
CITY-ST-ZIP	HARRISON, NY 10528
TITLE	D
NAME	ALSON, ANDREW
STREET ADDRESS	10 GENESSO TRAIL
CITY-ST-ZIP	HARRISON, NY 10528
TITLE	S
NAME	KELLY, MATTHEW
STREET ADDRESS	CREDIT SUISSE FIRST BOSTON, 11 MADISON AVE
CITY-ST-ZIP	NEW YORK, NY 10010
TITLE	D
NAME	PF GLOBAL REAL ESTATE ADVISORS LLC AGENT
STREET ADDRESS	8 CAMPUS DRIVE
CITY-ST-ZIP	PARSIPPANY, NJ 07054
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000542231
05/10/06-80089-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Francis J. Reilly, Jr. 4-24-06 973-734-1476
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

V.P. Prudential Investment Management, Inc.;