FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 18 PM 5:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000005671 (3)**

1. Corporation Name
LBK DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
520 MADISON AVE. SIXTH FLOOR NEW YORK NY 10022	520 MADISON AVE. SIXTH FLOOR NEW YORK NY 10022

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/14/1993**
3a. Date of Last Report: **06/21/1994**

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

2a. Mailing Address — 26
Suite, Apt. #, etc — 27: **6th Floor, c/o Tishman Speyer Properties**
City & State — 28
Zip — 29 — Country — 30

4. FEI Number: **13-3742468** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$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 ☒ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	SPEYER, JERRY I	12 NAME	
STREET ADDRESS	520 MADISON AVE.	13 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10022	14 CITY ST ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	NATHAN, ANDREW J	22 NAME	
STREET ADDRESS	520 MADISON AVE.	23 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10022	24 CITY ST ZIP	
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	ROTH, GARY W	32 NAME	
STREET ADDRESS	520 MADISON AVE.	33 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10022	34 CITY ST ZIP	
TITLE	T	41 TITLE	☐ Change ☐ Addition
NAME	AUGARTEN, DAVID N	42 NAME	
STREET ADDRESS	520 MADISON AVE.	43 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY 10022	44 CITY ST ZIP	
TITLE	DC	51 TITLE	☐ Change ☐ Addition
NAME	TISHMAN, ROBERT V	52 NAME	
STREET ADDRESS	520 MADISON AVE.	53 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(i), 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: David Augarten, VP Treasurer 3/21/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0001150 CP