2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED (New)
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P40710

1. Entity Name
RCMP MANAGEMENT, INC.

Principal Place of Business	Mailing Address
C/O RELATED COMPANIES 60 COLUMBUS CIR NEW YORK, NY 10023	C/O RELATED COMPANIES 60 COLUMBUS CIR NEW YORK, NY 10023

DO NOT WRITE IN THIS SPACE

01092006 No Chg-P CR2E034 (11/05)

4. FEI Number
13-3644948

☐ Applied For
☐ Not Applicable

6. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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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	DC
NAME	WINE, DAVID J.
STREET ADDRESS	60 COLUMBUS CIR
CITY-ST-ZIP	NEW YORK, NY 10023
TITLE	S
NAME	MCGUIRE, SUSAN J
STREET ADDRESS	60 COLUMBUS CIR
CITY-ST-ZIP	NEW YORK, NY 10023
TITLE	D
NAME	ROSS, STEPHEN M
STREET ADDRESS	60 COLUMBUS CIR
CITY-ST-ZIP	NEW YORK, NY 10023
TITLE	EVP
NAME	BRENNER, MICHAEL
STREET ADDRESS	60 COLUMBUS CIR
CITY-ST-ZIP	NEW YORK, NY 10023
TITLE	VP
NAME	BLAU, JEFF T
STREET ADDRESS	60 COLUMBUS CIR
CITY-ST-ZIP	NEW YORK, NY 10023
TITLE	P
NAME	BRODSKY, JEFFREY
STREET ADDRESS	60 COLUMBUS CIR
CITY-ST-ZIP	NEW YORK, NY 10023

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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: [signature] 1/20/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

By: Susan J. McGuire, Authorized Person