

2001 UNIFORM BUSINESS REPORT (UBR)

0004888 AF

DOCUMENT # **A96000000724**

1. Entity Name

RELATED RPA INVESTORS, LTD.

FILED

Principal Place of Business

**C/O THE RELATED COMPANIES
625 MADISON AVENUE
NEW YORK NY 10022**

Mailing Address

**2828 CORAL WAY, PENTHOUSE SUITE
MIAMI FL 33145**

01 FEB 12 PM 12:11

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



2. Principal Place of Business

C/O The Related Companies

3. Mailing Address

C/O The Related Companies

Suite, Apt. #, etc.

625 Madison Ave. Legal Dept.

City & State

new york, ny

Zip

10022

Country

U.S.A.

City & State

new york, ny

Zip

10022

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number

13-3881980

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**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$60,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **M04123**
NAME **RELATED RONEY PLAZA, INC.**
STREET ADDRESS **2828 CORAL WAY, PENTHOUSE SUITE**
CITY-ST-ZIP **MIAMI FL 33145**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Alexander
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/31/01
Date

212/421-5333
Daytime Phone #

CR2E003 (11/00)