

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90051 012 ***150.00

DOCUMENT # 827520

1. Corporation Name

FOREST CITY CAPITAL CORPORATION

Principal Place of Business

**1100 TERMINAL TOWER
50 PUBLIC SQUARE
CLEVELAND OH 44113
US**

Mailing Address

**730 TERMINAL TOWER
50 PUBLIC SQUARE
CLEVELAND OH 44113
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/22/1972

4. FEI Number

34-1008491

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**V
NAME PROHASKA, JAMES
STREET ADDRESS 1100 TERMINAL TOWER, 50 PUBLIC SQ
CITY-ST-ZIP CLEVELAND OH 44113**

TITLE ☐ DELETE

**P
NAME PELAVIN, EDWARD
STREET ADDRESS 1100 TERMINAL TOWER, 50 PUBLIC SQ
CITY-ST-ZIP CLEVELAND OH 44113**

TITLE ☐ DELETE

**VD
NAME MILLER, SAM H.
STREET ADDRESS 1100 TERMINAL TOWER, 50 PUBLIC SQ
CITY-ST-ZIP CLEVELAND OH 44113**

TITLE ☐ DELETE

**S
NAME SMITH, THOMAS G
STREET ADDRESS 1100 TERMINAL TOWER, 50 PUBLIC SQ
CITY-ST-ZIP CLEVELAND OH 44113**

TITLE ☐ DELETE

**VP
NAME BROCKLEHURST, JOHN D
STREET ADDRESS 1100 TERMINAL TOWER, 50 PUBLIC SQ
CITY-ST-ZIP CLEVELAND OH 44113**

TITLE ☐ DELETE

**COB
NAME RATNER, RONALD
STREET ADDRESS 1100 TERMINAL TOWER 50 PUBLIC SQ
CITY-ST-ZIP CLEVELAND OH 44113**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)