**FILED** 

Apr 30, 2003 8:00 am Secretary of State

04-30-2003 90118 019 \*\*\*150.00

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #

827520

1. Entity Name

FOREST CITY CAPITAL CORPORATION

CLEVELAND OH 44113

SIGNATURE:

				1	WETE					
Principal Plac	e of Business	Mailing A	Address				44000	000		
1100 TERMINA	L TOWER	730 TERMINAL TOWER				11028882				
50 PUBLIC SQ		50 PUBLIC SQUARE								
CLEVELAND O	H 44113	CLEVELAND OH 44113				- 11	8 <b>8</b> 18   18   18   18   18   18   18   18	11 <b>e</b> i 11 e		
US	(B) (B)	US 3. Mailing Address				- !!		) <b>11</b> )		
	Place of Business erminal Tower	1160 Terminal Tower				.,	04;31 10:14 ;1511 14431 01116 116	31 <b>4 6</b> 11 <b>6 14 31</b> 616 17	*1511 G1G11 E11	iri dinii indr
Suite, Apt. 50 Pub	#, etc. lic Square	Suite, Apt. #, etc. 50 Public Square				XX CHECK HERE IF MAKING CHANGES				
City & Stat	e	City & State				4. FEI N	umber 24-1000401		Ap	plied For
	and. Ohio	Cleveland, Ohio					34-1008491		No	t Applicable
44113	Country	<sup>Zip</sup> 44113	3	Country	Ì	5. Certif	icate of Status Desired		8.75 Add ee Required	
	6. Name and Address of Current Re	egistered A	Agent			7. Name	and Address of New F	Registered Ag	jent	
07.0000	SDATION OVOTER			Name						
	DRATION SYSTEM INE ISLAND ROAD	Street Add			Address (P.	ss (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324					<u> </u>	-				
				City	<del></del>	•		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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00						}	i. Election Campaign Fi	nancing	\$5.0	<b>0</b> May Be
Make Check Payable to Florida Department of State							Trust Fund Contribution	on. $\square$	Added	to Fees
10.	OFFICERS AND DI	RECTORS		11.		ADDITIO	ONS/CHANGES TO OFF	ICERS AND	DIRECTORS	3 IN 11
TITLE	lv		☐ Delete	TITLE	V		,	<del></del>	Change	Addition
NAME	LOVE, ANTHONY			NAME	Antho	ny Lo	ve	•	17	_
STREET ADDRESS	1100 TERMINAL TOWER, 50 PUBLIC	C SQ		STREET ADDRESS	1160	lermi	nal lower			
CITY-ST-ZIP	CLEVELAND OH 44113			CITY-ST-ZIP	Cleve	land.	Square Ohio 44113			
TITLE	P		☐ Delete	TITLE	ΠP				Change	☐ Addition
NAME	PELAVIN, EDWARD			NAME	Edwar	d Pei	avin nal Tower			ĺ
	1100 TERMINAL TOWER, 50 PUBLIC	C SQ		STREET ADDRESS	150 Pu	blic	nai Tower Square			
CITY-ST-ZIP	CLEVELAND OH 44113			CITY-ST-ZIP	<u>Čleve</u>	land,	Square Ohio 44113			<u></u>
TITLE	v		XX Delete	TITLE	FV			Ī. Ī	☐ Change	XX Addition
	MILLER, SAM H.			NAME	Vames 1160	J. P Termi	rohaska nal Tower	,		
	1100 TERMINAL TOWER, 50 PUBLIC	C SQ		STREET ADDRESS	Ĵ5Ō Pu.	b) ic	nal Tower Square	*		Į
CITY-ST-ZIP	CLEVELAND OH 44113		<del></del>	CITY-ST-ZIP	Cleve	land,	<u> Ohio 44113                                  </u>			
TITLE	S		☐ Delete	TITLE	<u>S</u> Ţ	_		)	Cx Change	☐ Addition {
	SMITH, THOMAS G		•	NAME	11 1 EA 1	Taumi	Smith nal Tower			}
	1100 TERMINAL TOWER, 50 PUBLIC	C SQ		STREET ADDRESS	50 Pul	blic	Square			
	CLEVELAND OH 44113			CITY-ST-ZIP	<u> Clevě</u>	land,	Square _Ohio_44113_			
TITLE	VP		Delete	TITLE	117			,	Change	☐ Addition
	BROCKLEHURST, JOHN D			NAME	իննը յ	u. Br Termi	ocklehurst nal Tower			Ì
	1100 TERMINAL TOWER, 50 PUBLIC	U SQ		STREET ADDRESS	j5̇Õ Pul	blic	Square Ohio 44113			
	CLEVELAND OH 44113			CITY-ST-ZIP			_Ohio_44113			
	COB		Delete	TITLE	DCOBC	Ĕ0 <sup>v</sup>	Datnon	,	CX Change	☐ Addition
	RATNER, RONALD 1100 TERMINAL TOWER 50 PUBLIC	: 50		NAME STREET ADDRESS	]] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	Țermi	Ratner nal Tower			
	ITTOO TEITIMINAAL IVMER JU FUDLIU	, UU			IKO Du	nlic	SALLENA			1

12. 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 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 or an attachment with an address with all other like empowered.

James J. Prohaska

CITY-ST-ZIP

ME OF SIGNING OFFICER OR DIRECTOR

4/18/03

Daytime Phone #