

2000 UNIFORM BUSINESS REPORT (UBR)

2/26/00-90024-017-\$150.00-\$150.00

DOCUMENT # 838022

1. Entity Name

MAPLE REALTY CORPORATION

FILED

00 MAR 31 AM 8:47

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

Principal Place of Business
NORTHSTAR PRESIDIO MGMT CO LLC
411 W PUTNAM AVE STE 270 ATTN A TAYLOR
GREENWICH CT 06830
US

Mailing Address
NORTHSTAR PRESIDIO MGMT CO LLC
411 W PUTNAM AVE STE 270 ATTN A TAYLOR
GREENWICH CT 06830-6261
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-2889409

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD**
NAME **ROTHSCHILD, ALLAN B**
STREET ADDRESS **411 WEST PUTNAM AVE. SUITE 270**
CITY-ST-ZIP **GREENWICH CT 06830**

☒ Delete

TITLE **VPC**
NAME **SCHACHTER, LAWRENCE R**
STREET ADDRESS **411 WEST PUTNAM AVE. SUITE 270**
CITY-ST-ZIP **GREENWICH CT 06830**

☒ Delete

TITLE **SVP**
NAME **PAGANELLI, J. PETER**
STREET ADDRESS **411 WEST PUTNAM AVE., SUITE 270**
CITY-ST-ZIP **GREENWICH CT 06830**

☒ Delete

TITLE **VP**
NAME **HUMBER, CHARLES**
STREET ADDRESS **411 WEST PUTNAM AVE., SUITE 270**
CITY-ST-ZIP **GREENWICH CT 06830**

☒ Delete

TITLE **D**
NAME **LUCAS, DALLAS E**
STREET ADDRESS **411 WEST PUTNAM AVE.**
CITY-ST-ZIP **GREENWICH CT**

☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **President / Director**
NAME **Michael A. Ashner**
STREET ADDRESS **Five Cambridge Center 9th floor**
CITY-ST-ZIP **Cambridge, MA 02142**

☐ Change ☒ Addition

TITLE **Vice President / Asst. Sec**
NAME **Peter Braverman**
STREET ADDRESS **Five Cambridge Center 9th floor**
CITY-ST-ZIP **Cambridge, MA 02142**

☐ Change ☒ Addition

TITLE **VP/Sec.**
NAME **Lara Sweeney**
STREET ADDRESS **Five Cambridge Center 9th floor**
CITY-ST-ZIP **Cambridge, MA 02142**

☐ Change ☒ Addition

TITLE **VP/Treasurer / A. Sec**
NAME **Carolyn Tiffany**
STREET ADDRESS **Five Cambridge Center 9th floor**
CITY-ST-ZIP **Cambridge, MA 02142**

☐ Change ☒ Addition

TITLE **Asst. Secretary**
NAME **Allison Forrester**
STREET ADDRESS **Five Cambridge Center**
CITY-ST-ZIP **Cambridge, MA 02142**

☐ Change ☒ Addition

LS

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other info empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mejor

3/27/2000

514

681 3636

Asst Secretary

CR2E034 (9/99)