

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
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90031 015 ***150.00

DOCUMENT # 840807

1. Corporation Name
IR-OAK CORP.

Principal Place of Business Mailing Address
C/O NORTHSTAR PRESIDIO MGMT CO. LLC
411 WEST PUTNAM AVE. SUITE 270
GREENWICH CT 06830
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/09/1978

4. FEI Number

13-0849736

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME SABELLA, RICHARD
STREET ADDRESS 411 WEST PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

1.1 TITLE PP
1.2 NAME Allan B. Rothschild
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

3.1 TITLE SVP, Sec. Trea
3.2 NAME J. Peter Paganelli
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

4.1 TITLE
4.2 NAME Charles Humker
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VPTS
NAME REARDON, KEVIN
STREET ADDRESS 411 WEST PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

5.1 TITLE
5.2 NAME Dallas E. Lucas
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
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 (1/198)