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**Secretary of State** 

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 841166**

SAVID REALTY CORPORATION

Mailing Address Principal Place of Business % NORTHSTAR PRESIDIO MGMT. CO. LLC % NORTHSTAR PRESIDIO MGMT. CO. LLC 411 W. PUTNAM AVENUE. SUITE 270 411 W. PUTNAM AVENUE, SUITE 270 DO NOT WRITE IN THIS SPACE GREENWICH CT 06830 GREENWICH CT 06830 3. Date Incorporated or Qualifed 07/31/1978 4. FEI Number Applied For 2a, Mailing Address 2. Principal Place of Business 13-2954663 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country This corporation owes the current year Intangible Country Zin E MO ☐ Yes Personal Property Tax. 25 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CORPORTION SERVICE COMPANY 82 Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 83 Zip Code 84 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change □ DELETE  $\overline{PD}$ 1.1 TITLE TITLE Allan B. Rothschild 1.2 NAME SABELLA, RICHARD— NAME 411 W. PUTNAM AVENUE, SUITE 270 1.3 STREET ADDRESS STREET ADDRESS GREENWICH CT 06830 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE SVCF 2.1 TITLE TITLE SCHACHTER, LAWRENCE B 2.2 NAME NAME Saml 411 W. PUTNAM AVENUE, SUITE 270 2.3 STREET ADDRESS STREET ADDRESS GREENWICH CT 06830 2. 4 CITY-ST-ZIP CITY-ST-ZIP SVP, Sec, Trea J. Peter Paganelli Addition ☐ Change DELETE 3.1 TITLE TITLE EVGC ROTHSCHILD, ALLAN B 32 NAME NAME 411 W. PUTNAM AVENUE, SUITE 270 3,3 STREET ADDRESS STREET ADDRESS GREENWICH CT 06830 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 4.1 TITLE TITLE Director REARDON, KEVIN 4, 2 NAME NAME Dallas & Lucas 411 W. PUTNAM AVENUE, SUITE 270 4.3 STREET ADDRESS STREET ADDRESS GREENWICH CT 06830 CITY-ST-ZIP 4 4 CITY-ST-ZIP ☐ DFLETE 5.1 TITLE ☐ Change ☐ Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition □ DELETE TITLE 6.2 NAME NAME

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 char attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR A 11/0 11 (0)

CR2E034 (11/98