FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 14, 2002 8:00 am Secretary of State DOCUMENT # 852069 1. Entity Name 05-14-2002 90449 006 ***150.00 GENERAL ELECTRIC REAL ESTATE EQUITIES, INC. Mailing Address Principal Place of Business **DEPT 6109** 260 LONG RIDGE ROAD 260 LONG RIDGE RD. P O BOX 8109 STANFORD CT 06927 STAMFORD CT 06927-9621 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 06-0984352 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ASST TREAS- TAXES Addition CR2E034 (9/01) Change ☐ Delete TITLE TITLE DCB John Ampto NAME NAME FRAZIER, MICHAEL D. nny Long Ridge Rd STREET ADDRESS STREET ADDRESS 260 LONG RIDGE RD. Strivifono, (T 06927 CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT ☐ Addition Delete TITLE Change Change NAME HYDE, JEFFREY L STREET ADDRESS STREET ADDRESS 260 LONG RIDGE RD. CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT Change ☐ Addition ☐ Delete TITLE TITI F DP NAME NAME PFEIFFER, ROBRT E. STREET ADDRESS STREET ADDRESS 260 LONG RIDGE RD. CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT ☐ Change ☐ Addition TITLE ☐ Defete TITLE **VPAS** NAME NAME BLOCK, BRUCE E. STREET ADDRESS STREET ADDRESS 260 LONG RIDGE RD. CITY-ST-ZIP CITY-ST-7IP STAMFORD CT Channe ☐ Addition Delete TITLE TITLE NAME NAME KAPLOW, MARK D. STREET ADDRESS STREET ADDRESS 260 LONG RIDGE ROAD CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME ALPERT, JANE K. STREET ADDRESS 260 LONG RIDGE RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT 13. I hereby certify that the information supplied with this filling 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 like empowered.

Date Daytime Phone #

203-357-4544