

REINSTATEMENT

-2001 UNIFORM BUSINESS REPORT (UBR)-

FILED

01 MAR 30 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A23009

1. Entity Name

Corporate Property Associates 6, A California Limited Partnership

Principal Place of Business

50 Rockefeller Plaza, 2/F
New York, NY 10020

Mailing Address

50 Rockefeller Plaza, 2/F
New York, NY 10020

2. Principal Place of Business

50 Rockefeller Plaza, 2/F

3. Mailing Address

50 Rockefeller Plaza, 2/F

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

New York, NY

City & State

New York, NY

4. FEI Number

13-3247122

Applied For

Not Applicable

Zip

10020

Country

USA

Zip

10020

Country

USA

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
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. Capital Contributions

as Shown on record. 5,521,000

10. Amount of Capital Contributions

in FLORIDA to date. 5,521,000

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P38998
NAME Carey Corporate Property
STREET ADDRESS 50 Rockefeller Plaza, 2/F
CITY-ST-ZIP New York, NY 10020

DOCUMENT #
NAME William Polk Carey
STREET ADDRESS 50 Rockefeller Plaza, 2/F
CITY-ST-ZIP New York, NY 10020

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Frank J. Machado, 2nd V.P.
Carey Corporate Property, Inc.

3/28/01

Date

212-492-1100

Daytime Phone #

CH2E003 (11/00)

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