

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 06, 2007 08:00 A
Secretary of State

DOCUMENT # A33489

1. Entity Name
RELATED GENERAL I, L.P. (LIMITED PARTNERSHIP)



Principal Place of Business
**C/O THE RELATED CO/ 60 COLUMBUS CIR.
NEW YORK, NY 10023**

Mailing Address
**C/O THE RELATED CO/ 60 COLUMBUS CIR.
NEW YORK, NY 10023**



03132007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
13-3644949

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

DATE _____

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00**

**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 # **P40725**
NAME **RCMP, INC.**
STREET ADDRESS **C/O THE RELATED CO/ 60 COLUMBUS CIR.**
CITY-ST-ZIP **NEW YORK, NY 10023**

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000000693516
04/16/07-80042-016 508.75

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

4/5/07
Date

212-421-5333
Daytime Phone #

By: **Susan F. McGuire, Authorized Agent**

STAPLE CHECK HERE