

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT  
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

John B. Northam

Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 JAN 20 PM 2:59

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

TSCE REAL ESTATE VENTURE, L.P.

1a.

DOCUMENT #

B97000000718

TSCE REAL ESTATE VENTURE, L.P.

Mailing Address

c/o Tishman Speyer Properties  
520 Madison Avenue  
New York, NY 10022

Principal Office Address

c/o Tishman Speyer Properties  
520 Madison Avenue  
New York, NY 10022

3. Date Formed or Registered

12/17/96

5a. Capital Contributions as  
Shown on Record

\$100

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

0

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3a. Date of Last Report

4. State or Country of Formation

DE

6. FEI Number

13-3972679

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is not acceptable)

888002415358--9

Suite, Apt. #, etc.

01/28/98-01117-003

City

\*\*\*\*156.25 \*\*\*\*156.25

FL

Zip Code

10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620 192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

TSCE Venture Corp.

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

c/o Tishman Speyer  
Properties  
520 Madison Avenue  
New York, NY 10022

11c. Registration/  
Document Number

F97000006906

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

1/13/98

Typed or Printed Name of General Partner Signing Form

Andrew J. Nathan, VP

Daytime Telephone Number

(212) 593-9475

CR2E003 (6/97)