

**2006.FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2006 08:00 AM
Secretary of State

DOCUMENT # F01000003437

1. Entity Name
BEACON OWNER CORP.



Principal Place of Business
**C/O FALCON REAL ESTATE INV. CO, LP
5005 LBJ FREEWAY, SUITE 1130
DALLAS, TX 75244**

Mailing Address
**C/O FALCON REAL ESTATE INV. CO., LP
5005 LBJ FREEWAY, SUITE 1130
DALLAS, TX 75244**



06302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **52-2339618** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD HALLENGREN, HOWARD E 570 LEXINGTON AVE., 32ND FLOOR NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VS MILLER, JACK D 150 N. MICHIGAN AVENUE, SUITE 2700 CHICAGO, IL 60601
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HACKETT, KEVIN R ESQ. 17 EAST 89TH STREET NEW YORK, NY 10128
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V SWEENEY, SCOTT 10815 RANCHO BERNARDO ROAD, STE 120 SAN DIEGO, CA 92127
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VAS MOREIRA, ROBERT 2977 MCFARLANE ROAD, SUITE 303 COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V HILL, DAVID A 5005 LBJ FREEWAY, SUITE 1130 DALLAS, TX 75244

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07/11/06-80023-016 150.00

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IN THIS SPACE**

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #