

8485

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90118 018 ***150.00

0847641 AT

DOCUMENT # F01000005872

1. Entity Name
FOREST CITY BLUFFSIDE CORPORATION



Principal Place of Business
**50 PUBLIC SQUARE, SUITE 1100
CLEVELAND OH 44113**

Mailing Address
**50 PUBLIC SQUARE, SUITE 1100
CLEVELAND OH 44113**

11000003



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
1160 Terminal Tower

3. Mailing Address
1160 Terminal Tower

Suite, Apt. #, etc.

Suite, Apt. #, etc.

50 Public Square

50 Public Square

City & State

City & State

Cleveland, Ohio

Cleveland, Ohio

4. FEI Number **34-1474279**

Applied For
Not Applicable

Zip
44113

Country
US

Zip
44113

Country
US

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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. 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
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **PD RATNER, JAMES A**
STREET ADDRESS **50 PUBLIC SQUARE, SUITE 1100**
CITY-ST-ZIP **CLEVELAND OH 44113**

TITLE Change Addition
NAME **James A. Ratner**
STREET ADDRESS **1160 Terminal Tower**
CITY-ST-ZIP **50 Public Square
Cleveland, Ohio 44113**

TITLE Delete
NAME **V BRADY, JAMES T**
STREET ADDRESS **50 PUBLIC SQUARE, SUITE 1100**
CITY-ST-ZIP **CLEVELAND OH 44113**

TITLE Change Addition
NAME **James T. Brady**
STREET ADDRESS **1160 Terminal Tower**
CITY-ST-ZIP **50 Public Square
Cleveland, Ohio 44113**

TITLE Delete
NAME **S SMITH, THOMAS G**
STREET ADDRESS **50 PUBLIC SQUARE, SUITE 1100**
CITY-ST-ZIP **CLEVELAND OH 44113**

TITLE Change Addition
NAME **Thomas G. Smith**
STREET ADDRESS **1160 Terminal Tower**
CITY-ST-ZIP **50 Public Square
Cleveland, Ohio 44113**

TITLE Delete
NAME **T MILLER, SAMUEL H**
STREET ADDRESS **50 PUBLIC SQUARE, SUITE 1100**
CITY-ST-ZIP **CLEVELAND OH 44113**

TITLE Change Addition
NAME **VT Samuel H. Miller**
STREET ADDRESS **1160 Terminal Tower**
CITY-ST-ZIP **50 Public Square
Cleveland, Ohio 44113**

TITLE Delete
NAME **VP RATNER, RONALD A**
STREET ADDRESS **50 PUBLIC SQUARE, SUITE 1100**
CITY-ST-ZIP **CLEVELAND OH 44113**

TITLE Change Addition
NAME **DV Ronald A. Ratner**
STREET ADDRESS **1160 Terminal Tower**
CITY-ST-ZIP **50 Public Square
Cleveland, Ohio 44113**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME **V James J. Prohaska**
STREET ADDRESS **1160 Terminal Tower**
CITY-ST-ZIP **50 Public Square
Cleveland, Ohio 44113**

12. 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 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:
James J. Prohaska
Vice President

4/18/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)