

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F01000005877

1. Entity Name

CATFISH (DE) QRS 14-79, INC.

Principal Place of Business

C/O W.P. CAREY & CO. LLC
50 ROCKEFELLER PLAZA
NEW YORK NY 10020

Mailing Address

C/O W.P. CAREY & CO. LLC
50 ROCKEFELLER PLAZA
NEW YORK NY 10020

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2353134

Applied For

Not Applicable

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> Delete
NAME	CAREY, WILLIAM P	
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR	
CITY-ST-ZIP	NEW YORK NY 10020	
TITLE	P	<input type="checkbox"/> Delete
NAME	WHITING, GORDON J	
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR	
CITY-ST-ZIP	NEW YORK NY 10020	
TITLE	V	<input type="checkbox"/> Delete
NAME	DUGAN, GORDON F	
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR	
CITY-ST-ZIP	NEW YORK NY 10020	
TITLE	V	<input type="checkbox"/> Delete
NAME	FERNANDEZ, CLAUDE F	
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR	
CITY-ST-ZIP	NEW YORK NY 10020	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	PARK, JOHN J	
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR	
CITY-ST-ZIP	NEW YORK NY 10020	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	BIGLER, DEBRA E	
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR	
CITY-ST-ZIP	NEW YORK NY 10020	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Vice President
STREET ADDRESS	Yasmin Guerrero
CITY-ST-ZIP	50 Rockefeller Plaza, 2/F New York, NY 10020

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Yasmin Guerrero Yasmin Guerrero, V. P.

Date

1/18/02

Daytime Phone #

(212) 492-1100



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)