

2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED

09 FEB 17 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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02/17/09--01010--010 **300.00

DOCUMENT # F02000003280			
1. Entity Name FOOTHILL TENANT CORPORATION			
Principal Place of Business 420 S. ORANGE AVENUE STE 700 ORLANDO, FL 32801		Mailing Address P.O. BOX 2226 ORLANDO, FL 32802-2226	
2. Principal Place of Business: No P.O. Box # 1 Post Office Square Suff. Adm. P. etc. 3100		3. Mailing Address 2 Post Office Square Suff. Adm. P. etc. 3100	
City & State Boston, MA		City & State Boston MA	
Zip 02109		Country	
4. FDI Number 01-0733711		Applied For Not Applicable	
5. Certificate of Status (Direct) ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMAS, STEPHANIE J 420 S. ORANGE AVE. STE 700 ORLANDO, FL 32801		7. Name and Address of New Registered Agent Name CT Corporation System 1200 S Pine Island Rd, Suite 250 Plantation, Florida 33324 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: <u>Connie Bryan</u> Assistant Secretary Date: <u>2/2/09</u>			
FILE NOW!! FEE IS \$150.00 After January 1, 2009, Fee will be \$300.00		In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	DC SENEFF, JAMES M JR 450 S. ORANGE AVE. ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	P Karamjit S. Kalsi 1585 Broadway New York, NY 10036 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DT BOURNE, ROBERT A 450 S. ORANGE AVE ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	D Michael J. Franco 1585 Broadway New York, NY 10036 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D HOSMER, JOHN R 11121 CARMEL COMMONS BLVD., SUITE 165 CHARLOTTE, NC 28228 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	D Michael T. Quinn 1585 Broadway New York, NY 10036 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	P GRISWOLD, JOHN A 420 S. ORANGE AVE., STE 700 ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	VP Daniel C. Wright 1 Post Office Square Ste 3100 Boston MA, 02109 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SEVP STRICKLAND, C BRIAN 420 S. ORANGE AVENUE, STE 700 ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	VP Warren Fields 1 Post Office Square Ste 3100 Boston MA, 02109 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	CEO HUTCHISON, THOMAS J III 420 S. ORANGE AVE., STE 700 ORLANDO, FL 32801 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	VP Jim Dins 1 Post Office Square Ste 3100 Boston MA, 02109 ☐ Change ☐ Addition
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 an individual 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 of this report.			
SIGNATURE: <u>Daniel C. Wright, VP</u>		Date: <u>2/2/09</u>	

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