

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 JUL 29 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000003437

1. Entity Name

RAIT ANTIGUA BAY MANAGER, INC.



Principal Place of Business

1818 MARKET STREET, 28TH FLOOR
PHILADELPHIA, PA 19103

Mailing Address

1818 MARKET STREET, 28TH FLOOR
PHILADELPHIA, PA 19103

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07272004

Chg-P

CR2E034 (10/03)

04

4. FEI Number

56-2281128

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

MUNROE, W. BRADLEY ESQ
239 E VIRGINIA STREET
TALLAHASSEE, FL 32301

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
Due by September 8, 2004**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME SCHAEFFER, SCOTT F
STREET ADDRESS 1818 MARKET STREET, 28TH FLOOR
CITY-ST-ZIP PHILADELPHIA, PA 19103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 500040246055
CITY-ST-ZIP 08/17/04--01043--009 **3.75

TITLE V ☐ Delete
NAME DISTEFANO, ELLEN J
STREET ADDRESS 1818 MARKET STREET, 28TH FLOOR
CITY-ST-ZIP PHILADELPHIA, PA 19103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 500040246055
CITY-ST-ZIP 08/17/04--01043--010 **5.00

TITLE C ☐ Delete
NAME COHEN, BETSY Z
STREET ADDRESS 1818 MARKET STREET, 28TH FLOOR
CITY-ST-ZIP PHILADELPHIA, PA 19103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 500040246055
CITY-ST-ZIP 08/17/04--01043--011 **150.00

TITLE DT ☐ Delete
NAME TRATMAN, HOWARD P
STREET ADDRESS 1818 MARKET ST 28TH FL
CITY-ST-ZIP PHILADELPHIA, PA 19103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME CURRY, JOIN J
STREET ADDRESS 1818 MARKET ST 28TH FL
CITY-ST-ZIP PHILADELPHIA, PA 19103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Ellen Distefano, VP 7/27/04

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