

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90180 045 ***150.00

DOCUMENT # F02000003638

1. Entity Name
DB PROPCO BP GP INC



Principal Place of Business
135 REVERE DRIVE
NORTHBROOK, IL 60062 US

Mailing Address
135 REVERE DRIVE
NORTHBROOK, IL 60062 US

40062551



04072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0621043

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**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
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	SCHOR, ANDREW W
STREET ADDRESS	221 N. LASALLE ST., STE. 3700
CITY-ST-ZIP	CHICAGO, IL 60601
TITLE	DVPS
NAME	IVANKOVICH, ANTHONY D
STREET ADDRESS	526 WOODLAND DRIVE
CITY-ST-ZIP	GLENVIEW, GA 30025
TITLE	D
NAME	UVA, KENNETH J
STREET ADDRESS	1209 ORANGE STREET
CITY-ST-ZIP	WILMINGTON, DE 19801
TITLE	D
NAME	DUVA, VICTOR A
STREET ADDRESS	1209 ORANGE ST.
CITY-ST-ZIP	WILMINGTON, DE 19801
TITLE	VPAS
NAME	IVANKOVICH, STEVEN
STREET ADDRESS	221 N. LASALLE STREET, STE 3700
CITY-ST-ZIP	CHICAGO, IL 60601
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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 #

4/2/2006 212516-4608



FORTRESS

ATTACHMENT

1345 AVENUE OF THE AMERICAS
46TH FLOOR
NEW YORK, NY 10105
TEL 212 479 5346

April 6, 2006

40062551
#F02000003658

Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314

Dear Sir or Madam:

Attached is the Florida annual report filing for DB Propco BP GP Inc. and check for \$150. Please note that the officers and directors for this entity have changed as follows:

<u>Name</u>	<u>Title</u>
Peter L Briger, Jr.	Chief Executive Officer/President
John C. King	Chief Financial Officer/Treasurer
Constantine M. Dakolias	Chief Credit Officer/Vice President
Marc K. Furstein	Chief Operating Officer/Secretary

Address:
1345 Avenue of the Americas, 46th Floor
New York, NY 10105

Please let me know if you need additional information.

Sincerely,

Kristina Leslie