

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90191 014 ***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		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 02-0621043	
Zip		Country		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 on this form is acceptable. (NOTE: Registered Agent signature required when constituting)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		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 NAME STREET ADDRESS CITY- ST- ZIP	CEOP BRIGER, PETER L JR ☐ Delete 1345 AVENUE OF THE AMERICAS 46TH FL NEW YORK, NY 10105		TITLE NAME STREET ADDRESS CITY- ST- ZIP	CFOT Cummins, Glenn ☐ Change ☒ Addition 1345 Ave of the Americas, 29th floor New York, NY 10105	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CFOT KING, JOHN C ☒ Delete 1345 AVENUE OF THE AMERICAS 46TH FL NEW YORK, NY 10105		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	COVP DAKOLIAS, CONSTANTINE M ☐ Delete 1345 AVE. OF THE AMERICAS 46TH FL NEW YORK, NY 10105		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	COOS FURSTEIN, MARC K ☐ Delete 1345 AVE OF THE AMERICAS 46TH FL NEW YORK, NY 10105		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ 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 is supplied in full, 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, and I am authorized 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 all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 4/16/2007 Dyer's Phone #		