
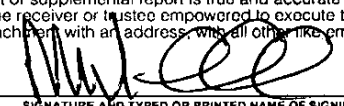


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90144 028 ***150.00

DOCUMENT # F05000007367 1. Entity Name BRE/LQ OPERATING LESSEE INC.					
Principal Place of Business 909 HIDDEN RIDGE STE 600 IRVING, TX 75038			Mailing Address 909 HIDDEN RIDGE STE 600 IRVING, TX 75038		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 20-3960467				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	MP GRAY, JONATHAN D % 345 PARK AVENUE NEW YORK, NY 10154 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MV SUMERS, GARY M % 345 PARK AVENUE NEW YORK, NY 10154 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEIN, WILLIAM J % 345 PARK AVENUE NEW YORK, NY 10154 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MVTS MCDONAGH, DENNIS J % 345 PARK AVENUE NEW YORK, NY 10154 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MV CAPLAN, KENNETH A % 345 PARK AVENUE NEW YORK, NY 10154 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BEOVICH, ANTHONY W % 345 PARK AVENUE NEW YORK, NY 10154 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CHLOUPEK, MARK M. 909 HIDDEN RIDGE, STE 600 IRVING, TX 75038 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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 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:  mark m. chloupek - v.p. 4/25/08 (214) 492-6600 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

40093647

BRE/LQ Operating Lessee Inc.

Document # F05000007367

Directors:

Gary M. Summers
Jonathan D. Gray
William J. Stein

Address:

345 Park Avenue, New York, NY 10154
345 Park Avenue, New York, NY 10154
345 Park Avenue, New York, NY 10154

Officers:

Jonathan D. Gray
Gary M. Summers
Dennis J. McDonagh
Kenneth A. Caplan
Alan Miyasaki
Mark M. Chloupek
Rob Harper

Title:

Senior Managing Director and President
Senior Managing Director and Vice President
Managing Director, Vice President, Treasurer and Secretary
Managing Director and Vice President
Vice President
Vice President
Vice President and Assistant Secretary

345 Park Avenue, New York, NY 10154
345 Park Avenue, New York, NY 10154
345 Park Avenue, New York, NY 10154
345 Park Avenue, New York, NY 10154
345 Park Avenue, New York, NY 10154
909 Hidden Ridge, Ste 600, Irving, TX 75038
345 Park Avenue, New York, NY 10154