

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006740

Entity Name: TIHM MEMBER CORP.

FILED
Jan 04, 2011
Secretary of State

Current Principal Place of Business:

725 FIFTH AVENUE, 26TH FLOOR
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

725 FIFTH AVENUE, 26TH FLOOR
NEW YORK, NY 10022

New Mailing Address:

FEI Number: 20-5074158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: TRUMP, DONALD J
Address: 725 FIFTH AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: V
Name: TRUMP, JR., DONALD J
Address: 725 FIFTH AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: V
Name: WEISSELBERG, ALLEN
Address: 725 FIFTH AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: V
Name: TRUMP, IVANKA
Address: 725 FIFTH AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: V
Name: GREENBLATT, JASON D
Address: 725 FIFTH AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: S
Name: GRAFF-RICCIO, RHONA
Address: 725 FIFTH AVENUE, 26TH FLOOR
City-St-Zip: NEW YORK, NY 10022

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DONALD J. TRUMP

P

01/04/2011

Electronic Signature of Signing Officer or Director

Date