2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000232

Entity Name: IDEAL (FL) QRS 16-136, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O W.P. CAREY AND CO. LLC 50 ROCKEFELLER PLAZA 2ND FLOOR NEW YORK, NY 10020 **Current Mailing Address: New Mailing Address:** C/O W.P. CAREY AND CO. LLC 50 ROCKEFELLER PLAZA 2ND FLOOR NEW YORK, NY 10020 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete () Change () Addition DUGAN, GORDON F Name: Name: 50 ROCKEFELLER PLAZA 2ND FL Address: Address: City-St-Zip: NEW YORK, NY 10020 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: PINOLA, RICHARD J Name: PINOLA RICHARD J 50 ROCKEFELLER PLAZA 2ND FL 50 ROCKEFELLER PLAZA 2ND FL Address: Address: NEW YORK, NY 10020 NEW YORK, NY 10020 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BLUME, MARSHALL E DR Name: Name: 50 ROCKEFELLER PLAZA 2ND FL Address: Address: NEW YORK, NY 10020 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MUNSON, ELIZABETH P Name: Name: Address: 50 ROCKEFELLER PLAZA 2ND FL Address: City-St-Zip: NEW YORK, NY 10020 City-St-Zip: Title: Title: () Delete ΑT (X) Change () Addition PRICE, JAMES D Name: WONG, ASONS S Name: 50 ROCKEFELLER PLAZA 2ND FL Address: 50 ROCKEFELLER PLAZA 2ND FL Address: City-St-Zip: NEW YORK, NY 10020 City-St-Zip: NEW YORK, NY 10020 Title: () Delete Title: () Change () Addition ZACHARIAS, THOMAS E Name: Name: 50 ROCKEFELLER PLAZA 2ND FL Address: Address: City-St-Zip: City-St-Zip: NEW YORK, NY 10020

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANSON S WONG AT 05/01/2009