

# 2000 UNIFORM BUSINESS REPORT (UBR)

19.10.2  
 APPROVED  
 08-TS-2000 90013 047 \*\*\*150.00  
 FILED

**DOCUMENT # F56549**

1. Entity Name  
**TISHMAN REALTY CORPORATION OF FLORIDA**

00 SEP -1 PH 12:14

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business C/O TISHMAN REALTY & CONSTRUCTION CO., INC. 666 FIFTH AVENUE, 36TH FLOOR NEW YORK NY 10103 US	Mailing Address C/O TISHMAN REALTY & CONSTRUCTION CO., INC. 666 FIFTH AVENUE, 36TH FLOOR NEW YORK NY 10103 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number <b>13-3094902</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so  (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE	<b>T</b> <input type="checkbox"/> Delete
NAME	<b>SCHWARZWALDER, LARRY</b>
STREET ADDRESS	<b>666 FIFTH AVE</b>
CITY-ST-ZIP	<b>NEW YORK, NY 10103</b>
TITLE	<b>S</b> <input type="checkbox"/> Delete
NAME	<b>KOTOUN, KATHLEEN</b>
STREET ADDRESS	<b>666 FIFTH AVENUE</b>
CITY-ST-ZIP	<b>NEW YORK NY</b>
TITLE	<b>DCOO</b> <input type="checkbox"/> Delete
NAME	<b>VICKERS, JOHN</b>
STREET ADDRESS	<b>666 FIFTH AVENUE</b>
CITY-ST-ZIP	<b>NEW YORK NY</b>
TITLE	<b>CEO</b> <input type="checkbox"/> Delete
NAME	<b>TISHMAN, JOHN L</b>
STREET ADDRESS	<b>666 FIFTH AVE</b>
CITY-ST-ZIP	<b>NEW YORK, NY 00000</b>
TITLE	<b>DEVP</b> <input type="checkbox"/> Delete
NAME	<b>TISHMAN, DANIEL</b>
STREET ADDRESS	<b>666 FIFTH AVE</b>
CITY-ST-ZIP	<b>NEW YORK NY</b>
TITLE	<b>AT</b> <input type="checkbox"/> Delete
NAME	<b>BECK, FRANK</b>
STREET ADDRESS	<b>666 FIFTH AVE</b>
CITY-ST-ZIP	<b>NEW YORK NY</b>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exempt on stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Larry Schwarzwald* *Treasurer* 8/1/00  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)



pg. 2 of 2

August 8, 2000

Uniform Business Report  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Dear Sir/Madam:

I recently received Form UBR, Florida's 2000 Uniform Business Report, for the following companies: Orange County Realty Corporation, #13-3210081; Tishman Hotel Corporation, #22-3544998; Tishman Development Management, Inc., #13-3485127; Tishman Rialto Management Corporation, #13-3571991; Tishman Dolphin Realty Corp., #13-3433141; THR Development Management Inc., #13-3972097; Tishman Realty Corporation of Lake Buena Vista, #13-3168198; Tishman Realty Corporation of Central Florida, #13-3171108; THR Swan Corp., #13-3972098; Tracco Hotel Corporation, #13-3433137; THR Dolphin Corp., #13-3972099; Tishman Construction Corporation of Florida, #13-3004035; Tishman Swan Realty Corp., #13-3433139; Tishman Asset Corporation, #13-3972101; and Tishman Realty Corporation of Florida, #13-3094902.

Upon evaluating the forms I noticed they were stamped "second notice" with a \$400 penalty added to the normal filing fee of \$150. According to our records, we did not receive the original forms for filing.

From a telephone conversation with one of your corporate business representatives, I was advised to write this letter explaining our non-receipt of the forms, and to submit the forms with checks for \$150 for each of the above referenced companies.

I have enclosed completed Form's UBR for the above companies (15) with the appropriate filing fee of \$150 each.

If you have any questions, please contact me.

Sincerely,

Douglas J. Nielsen, CPA  
Director of Finance & Taxation

DJN/eav

Encls.

cc: Larry Schwarzwald, CPA (w/o enclosures)  
Paul Praylo, CPA (w/o enclosures)