PROFIT CORPORATION ANNUAL REPORT

1999

Corporation Name



DOCUMENT # F9300001070

EIGHTH CAREY CORPORATE PROPERTY, INC.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90023 031 ***150.00

Mailing Address Principal Place of Business 50 ROCKERFELLER PL 50 ROCKERFELLR PLAZA 2ND FL 2ND FLOOR DO NOT WRITE IN THIS SPACE NEW YORK FL 10020 NEW YORK FL 10020 3. Date Incorporated or Qualifed 02/23/1993 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 13-3421287 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes the current year Intangible Zip Country Zip **M**No Personal Property Tax. 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 83 TALLAHASSEE FL 32301 Zip Code City 85 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS VICE PRESEDENT CASSISTANT TREASUNDE Change DELETE 1.1 TITLE TITLE DAUTO 6. TERMINE 50 ROCKETELLER PLAZA CR2E034 CAREY, WILLIAM P 1.2 NAME NAME 50 ROCKERFELLER PLAZA 1.3 STREET ADDRESS STREET ADDRESS NEW YORK, NY 10020 **NEW YORK NY** 1.4 CITY-ST-ZIF CITY-ST-ZIP EXECUTIVE UP CHIEF FINANCIAL OFFICE Change **▶**Addition **▼** DELETE 2.1 TITLE PD TITLE STEURN M. BERZIN 2.2 NAME CAREY, FRANCIS J NAME 50 ROCHEFELLER PLANA **50 ROCKERFELLER PLAZA** 2.3 STREET ADDRESS STREET ADDRESS NEW YORK, NY 10020 **NEW YORK NY** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 3.1 TITLE ☐ Change TITLE STODDARD, GEORGE E 3.2 NAME NAME **50 ROCKERFELLER PLAZA** 3.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE JONES, BARCLAY G. 4. 2 NAME NAME **50 ROCKERFELLER PLAZA** 4.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE TITLE 5.2 NAME HAMRICK, STEPHEN H NAME **50 ROCKERFELLER PLAZA** 53 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition ☐ DELETE TITLE KLEIN, LAWRENCE R DR 6.2 NAME NAME 6.3 STREET ADDRESS **50 ROCKERFELLER PLAZA**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

NEW YORK NY

STREET ADDRESS

CITY-ST-ZIP

DAVED 6 TERRINE, UP

(11/98)