FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 18, 2001 8:00 am F93000004651 DOCUMENT # **Secretary of State** 1. Entity Name AP-FLGP CORP., INC. 07-18-2001 90261 036 ***550.00 Principal Place of Business Mailing Address % APOLLO REAL ESTATE ADVISORS, L.P. % APOLLO REAL ESTATE ADVISORS. L.P. 2 MANHATTANVILLE ROAD 2 MANHATTANVILLE ROAD PURCHASE NY 10577 PURCHASE NY 10577 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 13-3736672 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET **SUITE 105** TALLAHASSEE FL 32301 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition ☐ Change ☐ Delete TITLE TITLE SOLOTRUK, RONALD J NAME NAME 2 MANHATTANVILLE RD STREET ADDRESS STREET ADDRESS **PURCHASE NY 10577** CITY-ST-ZIP CITY-ST ZIP ☐ Change ☐ Addition PD ☐ Delete TITLE HANNAN, JOHN J NAME STREET ADDRESS 2 MANHATTANVILLE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **PURCHASE NY 10577** ☐ Change Addition ☐ Delete TITLE KOENIG. STUART NAME STREET ADDRESS STREET ADDRESS 1301 AVENUE OF THE AMERICAS CITY-ST-ZIP **NEW YORK NY 10577** CITY-ST-ZIP Addition ☐ Change TITLE Delete TITLE VPAS NAME **BODEY, ROBERT S** NAME Cohn, Joel STREET ADDRESS STREET ADDRESS 1999 AVENUE OF THE STARS 2 Manhattanville Road CITY-ST-ZIP CITY-ST-ZIP LOS ANGELES CA 90067 Purchase, New York 10577 Change **VPAS** ☐ Delete TITLE ☐ Addition TITLE NAME NAME NEIBART, LEE STREET ADDRESS STREET ADDRESS 1301 AVENUEOF THE AMERICAS **NEW YORK NY 10019** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE WEINER, MICHAEL D. NAME NAME STREET ADDRESS STREET ADDRESS 1999 AVENUE OF THE STARS LOS ANGELES CA 90067 CITY-ST-ZIP CITY-ST-ZIP 13. 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 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

REQUENTIAL J. Solotruk

7-11-01

914-694-8000

Davtime Phone #