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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003396 (8)

PRIME RETAIL FINANCE, INC.

Principal Place of Business Mailing Address 19TH FLOOR 19TH FLOOR 100 EAST PRATT STREET 100 EAST PRATT STREET BALTIMORE MD 21202 **BALTIMORE MD 21202-1009** 3. Date Incorporated or Qualified 3a. Date of Last Report 06/28/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. EEL Number Applied For 52-1885613 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip 8. This corporation has fiability for intangible tax under s. 199.032 **⊠**N₀ Yes 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MANN, WILLIAM J 81 Name **GULF COAST FACTORY SHOPS** Street Address (P.O. Box Number is Not Acceptable) 5481 FACTORY SHOPS BOULEVARD **ELLENTON FL 34222** 83 84 Zip Code 85 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or punted harve of registered agent and little it applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change Addition 1.1 1010 RESCHKE, MICHAEL W NAME 1.2 NAME 100 EAST PRATT STREET, 19TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS **BALTIMORE MD** CITY-ST-ZIP 14 CITY-ST-ZIP CEOD DELETE Change ☐ Addition TITLE 2111116 CARPENTER, WILLIAM H JR NAME 2.2 NAME 100 EAST PRATT STREET, 19TH FLOOR STREET ADDRESS 2.3 STREET ADDRESS BALTIMORE MD 21202 CITY-ST-ZIP 2 4 CiTY-ST-7IP PCOD Addition DELETE Change TITLE 3 1 7171.6 ROSENTHAL, ABRAHAM NAME 32 NAME 100 EAST PRATT STREET, 19TH FLOOR STREET ADDRESS 3.3 STREET ADDRESS **BALTIMORE MD** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE RESCHKE, GLENN D NAME 4. 2 NAME 100 EAST PRATT STREET, 19TH FLOOR STREET ADDRESS 4.3 STREET ADDRESS **BALTIMORE MD 21202** City-ST-ZiP 4.4 CITY - \$1 - ZIP v/s Change TITLE □ DELETE 51 TITLE x Addition PHILLIPS, DAVID G NAME 5.2 NAME Schroeder, C. Alan 100 EAST PRATT STREET, 19TH FLOOR 100 East Pratt Street, 19th Floor STREET ADDRESS 5.3 STREET ADDRESS **BALTIMORE MD 21202** Baltimore, MD 21202 CITY - ST - ZIP 5.4 CITY - \$1 - 7IP DELETE ☐ Change Addition TITLE 6.1 10 LE **GOTHELF, STEVEN S** NAME 6.2 NAME 100 EAST PRATT STREET, 19TH FLOOR STREET ADDRESS 6.3 STREET ADDRESS **BALTIMORE MD** CITY-ST-ZIP 6.4 CITY - ST - ZIF 14. I do 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 of 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 as an attachment with an addition.

SIGNATURE:

in their

4/30/47

(410) 234-1773

FILED

May 14 1997 8:00am

Secretary of State