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FILED

May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000006511 (9)

1. Corporation Name
SFERS X REALTY CORPORATION

Principal Place of Business
1 CALIFORNIA ST
SUITE 1400
SAN FRANCISCO CA 94111-5415
US

Mailing Address
1 CALIFORNIA ST
SUITE 1400
SAN FRANCISCO CA 94111-5415
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
12/20/1994

3a. Date of Last Report
04/09/1996

4. FEI Number

94-3214198

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ~~XX~~DELETE
NAME BENNETT, W. VERNON JR.
STREET ADDRESS 1 CALIFORNIA ST SUITE 1400
CITY-ST-ZIP SAN FRANCISCO CA

TITLE DPCO ~~XX~~DELETE
NAME FIDAMAN, ROBERT A
STREET ADDRESS 1 CALIFORNIA ST SUITE 1400
CITY-ST-ZIP SAN FRANCISCO CA

TITLE EVSG ☐ DELETE
NAME HOWERTON, HERMAN H
STREET ADDRESS 1 CALIFORNIA ST SUITE 1400
CITY-ST-ZIP SAN FRANCISCO CA

TITLE EVCF ~~XX~~DELETE
NAME GIUSTI, MARGOT M
STREET ADDRESS 1 CALIFORNIA ST SUITE 1400
CITY-ST-ZIP SAN FRANCISCO CA

TITLE DEV ☐ DELETE
NAME ZUZACK, RONALD E
STREET ADDRESS 1 CALIFORNIA ST
CITY-ST-ZIP SAN FRANCISCO CA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DCCFOT ☐ Change ~~XX~~Addition
1.2 NAME Finelli, William A.
1.3 STREET ADDRESS One North Broadway, Suite 500
1.4 CITY-ST-ZIP White Plains, NY 10601

2.1 TITLE AVPACAS ☐ Change ~~XX~~Addition
2.2 NAME Chapro, Karen K.
2.3 STREET ADDRESS One North Broadway, Suite 500
2.4 CITY-ST-ZIP White Plains, NY 10601

3.1 TITLE VSGC ~~XX~~Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE AT ☐ Change ~~XX~~Addition
4.2 NAME Maxwell, Robert D.
4.3 STREET ADDRESS One California Street, Suite 1400
4.4 CITY-ST-ZIP San Francisco, CA 94111

5.1 TITLE DPCEO ~~XX~~Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE AT ☐ Change ~~XX~~Addition
6.2 NAME Tully, Patrick J.
6.3 STREET ADDRESS One North Broadway, Suite 500
6.4 CITY-ST-ZIP White Plains, NY 10601

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 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.

SIGNATURE:

[Signature]
HERMAN H. HOWERTON, JR. General Counsel & Secretary

4/28/97

415/678-2000

Date

Daytime Phone #

CR2E034 (9/96)