## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CÓRPORATION** ANNUAL REPORT



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

1996

## DOCUMENT # 1. Corporation Name F9500000068 (5)

ORLANDO TWO RPF III REALTY CORP.

Principal Place of Business % GE INVESTMENTS

Mailing Address

OF CE BRIEDTHELES

2. Principal Place of Business		2a. Mailing Address				
21		26 Clo GEIC RIE Tax Dept.				
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				
City & State		27 P.D. BOX 120073				
		City & State				
23		28 Stamford, CT				
Zip	Country	Zip Country				
24	25	29 06912-0073 30 USA				
	9 Name and Address of	Current Registered Agent				

**APPROVED** AND

1996 JUN -4 PM 2: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA



	ER ST. CT 06904	3003 SUMMER ST. Stamford Ct 06904			3. Date Incorporated or Qualified	3a. Date	of Last	Report
	ace of Business	2a. Mailing Address			01/05/1995 4. FEI Number	1		T
21		26 Clo GEIC RIC	Tax	ሙስተ የ	APPLIED FOR 06-	010129	<u>-</u>	Applied For
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.	//W_	M51	1	171720		Not Applicable
City & State		27 P.O. BOX 120073			5. Certificate of Status Desired Fee Required			
Zip		City & State 28 Stamford, C	7		Election Campaign Financing     Trust Fund Contribution			00 May Be ded to Fees
24	Country 25	29 06912-0073	Gountry 301 1154		8. This corporation has liability for in Florida Statutes  Yes		under	s 199.032,
	9. Name and Address of Curre	nt Registered Agent	001 037	7	10. Name and Address of New Ro		cont	
			81	Name	To. Trains and Address of New York	edistaten w	gent	
CORPO	RATION SERVICE COMPANY							
1201 HA	YS ST.		82		dress (P.O. Box Number is Not Acceptable	e)		
	ASSEE FL 32301		83					
			84	City		EI		Zip Code
11. Pursuant to	o the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the above-r	named corpo	pration submits this statement for the purp	XOSE of ober	noine its	registered office
familiar with	ed agent, or both, in the State of Flori h, and accept the obligations of, Sec	ida. Such change was authorized tion 607.0505. Florida Statutes	by the corp	oration's bo	pration submits this statement for the purp ard of directors. I hereby accept the appo	intment as r	egister	ed agent. I am
SIGNATURE								
12.	Signature, Typed or printed name of registered again	Land title if applicable (NOTE:  D DIRECTORS		it signature requir	ed when reinstating)	DATE		
TITLE	D OFFICERS AN	DELETE	13.		ADDITIONS/CHANGES TO OFFK			
1								
VAME	CICI INTTI DODEDT D				Date Date AK B	L	Change	Addition Addition
	GIGLIOTTI, ROBERT P		1.2 NAME	D	vya, Patrick P	L	Change	Addition
STREET ADDRESS	3003 SUMMER ST.		1.2 NAME 1.3 STREET	ADDRESS 30	103 Symmer Street		Change	Addition
STREET ADDRESS CITY-ST-ZIP	3003 SUMMER ST. STAMFORD CT 06904	C7 Noters	1.2 NAME 1.3 STREET 1.4 CITY-S	ADDRESS 30	wyer, Patrick F 103 Symmer Street amford, CT 06904		Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE	3003 SUMMER ST. STAMFORD CT 06904 VSD	DELETE	1.2 NAME 1.3 STREET 1.4 City-S 2.1 Title	ADDRESS 30	103 Symmer Street		Change	•
STREET ADDRESS CITY-ST-ZIP TITLE NAME	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J	☐ DELETE	1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME	ADORESS 30 1-ZIP 51	103 Symmer Street			•
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J 3003 SUMMER ST.	☐ DELETE	1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS 30 1-ZIP 31 ADDRESS	103 Symmer Street			•
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J		1.2 NAME 1.3 STREET 1.4 CITY - S 2.1 TIPLE 2.2 NAME 2.3 STREET 2.4 CITY - S	ADDRESS 30 1-ZIP 31 ADDRESS	103 Symmer Street		Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J 3003 SUMMER ST. STAMFORD CT 06904 T	☐ DELETE	1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CHY-S 3.1 TITLE	ADDRESS 50 1-ZIP 51 ADDRESS 1-ZIP	no3 Sammer Street amford, CT OLA 194			Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J 3003 SUMMER ST. STAMFORD CT 06904 T LEVANTI, STEPHEN J		1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CHY-S 3.1 TITLE 3.2 NAME	ADDRESS 30 1-ZIP 31 ADDRESS 1-ZIP 4	no3 Symmer Street ramford, CT OG904 vanti, Stophen J.		Change	Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP ITLE VAME STREET ADDRESS	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J 3003 SUMMER ST. STAMFORD CT 06904 T LEVANTI, STEPHEN J 3003 SUMMER ST.		1.2 NAME 1.3 STREET 1.4 CHY-S 2.1 HILE 2.2 NAME 2.3 STREET 2.4 CHY-S 3.1 HILE 3.2 NAME 3.3 STREET	ADDRESS 30 1-ZIP 31 ADDRESS 1-ZIP 4 ADDRESS 30 ADDRESS 30	no3 Summer Street ramford, CT OG904 vanti, Stophen J. no3 Summer Street		Change	Addition
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STREET ADDRESS CITY-SI-ZIP TITLE NAME	3003 SUMMER ST. STAMFORD CT 06904 VSD STRONE, MICHAEL J 3003 SUMMER ST. STAMFORD CT 06904 T LEVANTI, STEPHEN J 3003 SUMMER ST.	☐ DELETE	1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.4 CITY-S 5.5 TITLE 5.7 NAME 5.3 STREET 5.4 CITY-S 5.6 CITY-S	ADDRESS 1-ZIP  ADDRESS 3C 1-ZIP  ADDRESS 51  ADDRESS -ZIP  ADDRESS ADDRESS	vanti, Stophen J.  vanti, Stophen J.  vas summer street  amford, CT 06904  -067047		Change Change Change Change	Addition  Addition  Addition  Addition
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appears in Block 12 or Block 13 if changed or or

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR STRONG 5 Dave 196 (203) 336-2300