



# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90195 008 \*\*\*150.00

<b>DOCUMENT # F95000003497</b> 1. Entity Name TAYLOR SIMPSON GENERAL PARTNER INC.						
Principal Place of Business ONE ROCKEFELLER PLAZA 23RD FLOOR NEW YORK, NY 10020 US			Mailing Address ONE ROCKEFELLER PLAZA 23RD FLOOR NEW YORK, NY 10020 US			
2. Principal Place of Business - No P.O. Box # <b>380 Lexington Ave.</b>		3. Mailing Address <b>380 Lexington Ave.</b>		 02012007 Chg-P CR2E034 (12/06)		
Suite, Apt. #, etc. <b>Suite 710</b>		Suite, Apt. #, etc. <b>Suite 710</b>				
City & State <b>New York, NY</b>		City & State <b>New York, NY</b>				
Zip <b>10168</b>		Zip <b>10168</b>				
Country <b>USA</b>		Country <b>USA</b>		4. FEI Number <b>13-3841020</b>		
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>						
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. 1 S.E. THIRD AVENUE 28TH FLOOR, #2800 MIAMI, FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____						
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007, Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>				
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAYLOR, PAUL E III 1 ROCKEFELLER PLAZA SUITE 2300 NEW YORK, NY 10020 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLONNADE PROPERTIES LLC 380 LEXINGTON AVE. SUITE 710 NEW YORK, NY 10168 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMPSON, KENNETH H JR 1 ROCKEFELLER PLAZA NEW YORK, NY 10020 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLONNADE PROPERTIES LLC 380 LEXINGTON AVE. SUITE 710 NEW YORK, NY 10168 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SAMBUCO, JOSEPH S 1 ROCKEFELLER PLAZA, #23RD FLOOR NEW YORK, NY 10020 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLONNADE PROPERTIES LLC 380 LEXINGTON AVE. SUITE 710 NEW YORK, NY 10168 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FELDMAN, JEFFREY B ONE ROCKEFELLER PLAZA, #23RD FLOOR NEW YORK, NY <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLONNADE PROPERTIES LLC 380 LEXINGTON AVE. SUITE 710 NEW YORK, NY 10168 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAYLOR, PAUL E JR 1 ROCKEFELLER PLAZA, SUITE 2300 NEW YORK, NY 10020 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLONNADE PROPERTIES LLC 380 LEXINGTON AVE. SUITE 710 NEW YORK, NY 10168 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: <u>Joseph Sambuco</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>						
<small>Date Daytime Phone #</small>						