FILED Feb 23, 1999 8:00 am

Secretary of State

02-23-1999 90089 017 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FROFIT* CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F97000003061

1. Corporation Name

	HARBOR APARTMENTS, IN											
Principal Place of Business Mailing Address					- n							
101 CALIFORNIA STREET, 26TH FLOOR 101 CALIFORNIA STREET, 2 SAN FRANCISCO CA 94111-5853 SAN FRANCISCO CA 94111-					JK							
SAN TANADOGO SA STATE SOOS								DO NOT WRITE IN THIS SPACE				
							06/12/1					
2. Principal Pl	ace of Business	2a. Mailing	Address				4. FEI Numb		_		pplied For	
21		26					94-3272	<u>24 10 </u>	_		ot Applicable	
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				5. Certifcate	of Status Desired			Additional equired	
City & State	9	City & S	City & State				6. Election C	ampaign Financing		+	May Be	
23		28				Trust Fund	d Contribution		Added	to Fees		
Zip	Country	Zip		Count	try			oration owes the cur	rent year Inta			
24]	25]	29]		10				Property Tax.	Danistand :	☐ Yes	□No	
	9. Name and Address of Curre	nt Registered Ag	<u>jent</u>		31	Name	10. Name and	Address of New	Registered /	Agent		
СТ	CORPORATION SYSTEM			,	"	Mairie						
1200 SOUTH PINE ISLAND ROAD				ξ	32	Street A	dress (P.O. Box Nu	mber is Not Accept	table)			
PLANTATION FL 33324				-	33			_	_			
	VIV.III.011 1 2 0002 1)`	"							
				8	84	City		<u> </u>	FL	85 Zip	Code	
44 - Duran and	to the provisions of Sections 607.05	22 and 607 1609	Elorida Statutes	the abr	7//0-	named c	rnoration submits th	his statement for the	numose of	changing its	s registered	
office or D	to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such	change was aut	nonzed t	וז עכ	he corpor	tion's board of dire	ctors. I hereby acce	pt the appoir	itment as re	egistered	
SIGNATURE		_ 							DATE			
				egistered Agent signature required				S/CHANGES TO O		D DIRECTO	ORS IN 12	
TITLE	PD OFFICERS AI	ND DIRECTORS	DELETE	1.1 TITU	F		ADDITIONS	3/CITANGES 10 O	TOLING AIR	Change	Addition	
	STEPPE, STEPHEN M			1.2 NAM							_	
NAME	101 CALIFORNIA STREET, 26TH FLOOR			1.3 STREET ADDRESS							,	
STREET ADDRESS	SAN FRANCISCO CA 94111-5					- 1					1	
CITY-ST-ZIP TITLE	VAS		☐ DELETE	1.4 CITY 2.1 TITL		-211				Change	☐ Addition	
NAME	EGAN. GERALD E			2.2 NAM								
STREET ADDRESS	OTE MODELLA MOUNCANI AVENUE AACT ELOOD					ADDRESS				-		
CITY-ST-ZIP	CUICACO II 20044 1004			2.4 CITY-ST-ZIP								
TITLE	V		DELETE	3.1 TITL						Change	☐ Addition	
NAME	KING, DONALD A JR			3.2 NAM	ΙE							
STREET ADDRESS	875 N MICHIGAN AVE, 41ST	FLOOR		3.3 STR	EET/	ADDRESS					ļ	
CITY-ST-ZIP	CHICAGO IL 60611-1901			3.4. CIT	Y-ST	-ZIP		1				
TITLE	V	_	DELETE	4.1 TITU						☐ Change	☐ Addition	
NAME	DEMAY, TRACY L			4. 2 NAM	ΛE	-						
STREET ADDRESS	101 CALIFORNIA STREET, 26	TH FLOOR				ADDRESS						
CITY-ST-ZIP	SAN FRANCISCO CA 94111-5			4.4 CITY								
TITLE	V		☑ DELETE	5.1 TITL			<u> </u>			Change	Addition	
NAME	HAMOR, ROBERT H			5.2 NAM	E		King, Jame					
STREET ADDRESS	55 EAST 52ND STREET, 31ST	FLOOR		5.3 STRI	EET/	ADDRESS	375 N. Mic	higan Ave.	, 41st	Fl.		
CITY-ST-ZIP	NEW YORK NY 10055-3198			5.4 CITY	/-ST-	-ZIP	Chicago, I	L 60611-19	01			
TITLE	٧		DELETE	6.1 TITL	E					Change	☐ Addition	
NAME	HANRAHAN, ROBERT V			6.2 NAM	ŧΕ						ĺ	

14. 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 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, with all other like empowered.

SIGNATURE:

Treasurer/Secretary 1/6/99** (312) 266-9300**

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

150 SOUTH WACKER DRIVE, SUITE 3030

CHICAGO IL 60606