

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90112 029 ****61.25

0080388

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000004988

1. Corporation Name

TGM OXFORD SQUARE INC.

Principal Place of Business

C/O TGM ASSOCIATES L.P.
650 FIFTH AVENUE
NEW YORK NY 10019

Mailing Address

C/O TGM ASSOCIATES L.P.
650 FIFTH AVENUE
NEW YORK NY 10019



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

09/16/1997

4. FEI Number

13-3898009

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

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 617.0502 and 617.1508, 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 617.0503, 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
NAME
STREET ADDRESS
CITY-ST-ZIP

8PD
GOCHBERG, THOMAS
% 650 FIFTH AVENUE 28TH FLOOR
NEW YORK NY 10019

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

BEVP
MACY, STEVEN C
% 650 FIFTH AVENUE 28TH FLOOR
NEW YORK NY 10019

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

8JP
MEICHELBECK, PAUL V
% 650 FIFTH AVENUE 28TH FLOOR
NEW YORK NY 10019

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VT
STEVES, ROBERT J
% 650 FIFTH AVENUE 28TH FLOOR
NEW YORK NY 10019

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VAS
RUTTER, BRIAN
% 650 FIFTH AVENUE 28TH FLOOR
NEW YORK NY 10019

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
ROTHBLUM, JOYCE
% 650 FIFTH AVENUE 28TH FLOOR
NEW YORK NY 10019

☒ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)