

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2006 8:00 am
Secretary of State

09-06-2006 90033 010 ***150.00

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1. Entity Name
RECI XX, INC.



Principal Place of Business Mailing Address
% REAL ESTATE CAPITAL PARTNERS LP % REAL ESTATE CAPITAL PARTNERS LP
~~1185 AVENUE OF THE AMERICAS 18TH FLOOR~~ ~~1185 AVENUE OF THE AMERICAS 18TH FLOOR~~
NEW YORK, NY 10036-2601 NEW YORK, NY 10036-2601

2. Principal Place of Business 3. Mailing Address
Real Estate Capital Partners, L.P. **Real Estate Capital Partners, L.P.**

Suite, Apt. #, etc. Suite, Apt. #, etc.
114 West 47th Street, 23rd Floor **114 West 47th Street, 23rd Floor**

City & State City & State
New York, N.Y. **New York, N.Y.**

Zip Country Zip Country
10036-1508 **10036-1508**

07062006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
13-3971587 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 _____

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees** In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME **KINNEY, ROBERT L**
STREET ADDRESS **1185 AVENUE OF THE AMERICAS 18TH FLOOR**
CITY-ST-ZIP **NEW YORK, NY 100362601**

TITLE V ☐ Delete
NAME **SHEWER, KARIN E**
STREET ADDRESS **1185 AVENUE OF THE AMERICAS 18TH FLOOR**
CITY-ST-ZIP **NEW YORK, NY 100362601**

TITLE DV ☒ Delete
NAME **LAMLE, HUGH R**
STREET ADDRESS **1185 AVENUE OF THE AMERICAS 18TH FLOOR**
CITY-ST-ZIP **NEW YORK, NY 100362601**

TITLE S ☐ Delete
NAME **MC GEE, ROBERT J**
STREET ADDRESS **1185 AVENUE OF THE AMERICAS 18TH FLOOR**
CITY-ST-ZIP **NEW YORK, NY 100362601**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Chairman - Kinney, Robert L.** ☒ Change ☐ Addition
NAME
STREET ADDRESS **114 W. 47th Street, 23rd Flr**
CITY-ST-ZIP **New York, N.Y. 10036**

TITLE **President - Karin E. Shewer** ☒ Change ☐ Addition
NAME
STREET ADDRESS **114 W. 47th Street, 23rd Flr**
CITY-ST-ZIP **New York, N.Y. 10036**

TITLE **Vice President - Doocy, Paul J.** ☒ Change ☐ Addition
NAME
STREET ADDRESS **114 W. 47th Street, 23rd Flr**
CITY-ST-ZIP **New York, N.Y. 10036**

TITLE **ST - McGee, Robert J.** ☒ Change ☐ Addition
NAME
STREET ADDRESS **114 W. 47th Street, 23rd Flr**
CITY-ST-ZIP **New York, N.Y. 10036**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/31/06 212-655-4393
Date Daytime Phone #