2007 FOR PROFIT CORPORATION ANNUAL REPORT

6. Name and Address of Current Registered Agent

DOCUMENT # F98000000375

1. Entity Name

THR DEVELOPMENT MANAGEMENT INC.



FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

1201 HAYS STREET TALLAHASSEE, FL 32301

SIGNATURE:

% TISHMAN ASSET CORPORATION 666 FIFTH AVENUE NEW YORK, NY 10103

CORPORATION SERVICE COMPANY

Mailing Address

% TISHMAN ASSET CORPORATION 666 FIFTH AVENUE NEW YORK, NY 10103



DO NOT WRITE IN THIS SPACE

04102007	No Chg-P	CR2E034 (11/05)		5)
4. FEI Number				Applied For

5. Certificate of Status Desired

13-3972097

Not Applicable
\$8.75 Additional
Fee Required

. . .

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pricions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.						
	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finant Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO VICKERS, JOHN A 666 FIFTH AVENUE NEW YORK, NY 10103					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SALES, WILLIAM J 666 FIFTH AVENUE NEW YORK, NY 10103				000000735314 05/10/07-80028-019 500.0	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV LIVINGSTON, JOHN 666 FIFTH AVENUE NEW YORK, NY 10103			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV SIMONE, JOSEPH J SS 666 FIFTH AVENUE NEW YORK, NY 10103			IN THIS SPACE		
TITLE NAME STREET ADDRESS CTYY-ST-ZIP	EV TISHMAN, DANIEL R 666 FIFTH AVENUE NEW YORK, NY 10103					
NAME STREET ADDRESS CITY-ST-ZIP	S BUSCEMI, GARY 666 FIFTH AVENUE NEW YORK, NY 10103					

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 recember 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 attachyfoli with an addges, with all other like empowered.