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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000002965

IPERS RIVERPLACE SHOPPING CENTER, INC.

Principal Place of Business								
101 CALIFORNIA ST., 26TH FL.								
SAN FRANCISCO CA 94111-5853								

Mailing Address

101 CALIFORNIA ST., 26TH FL. SAN FRANCISCO CA 94111-5853

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

03-01-1999 90092 002 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

05/26/1998

2. Principal Pla	ace of Business	2a. Mailing Address				94-3301211	Apr	lied For	
21	26				APPLIED FOR		Not	Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.		-		5. Certificate of Status De	esired \square	\$8.75 A		
22	27				s. coralocto or states or		Fee Red	quired	
City & State	City & State City & State				6. Election Campaign Financing \$5.00 May Be				
23	28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip Country			8. This corporation owes the current year Intangible				
24	25 29 30				Personal Property Tax.				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
O T CORPORATION OVERTIN				Name					
C T CORPORATION SYSTEM				82 Street Address (P.O. Box Number is Not Acceptable)					
1200 SOUTH PINE ISLAND ROAD									
PLA	NTATION FL 33324		83			•			
				City			85 Zip C	ode	
A TELL A TO				1		FL			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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									
office or re agent. I ar	egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes		ins board of directors. There	by accept the appea			
V								\	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				nt signature required		DATE			
12.	OFFICERS AND		13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES	S TO OFFICERS AN			
TITLE	DP	☐ DELETE	1.1 TITLE				☐ Change	☐ Addition	
NAME	KING, DONALD A		1.2 NAME						
STREET ADDRESS	875 N. MICHIGAN AVE., 41ST F	L.	1.3 STREET	ADDRESS				}	
CITY-ST-ZIP	CHICAGO IL 60611-1901		1.4 CITY-S	T-ZIP					
TITLE	VAS	☐ DELETE	2.1 TITLE				Change	Addition	
NAME	EGAN, GERALD E		2.2 NAME						
STREET ADDRESS	875 N. MICHIGAN AVE., 41ST F	L.	2.3 STREE	T ADDRESS					
CITY-ST-ZIP	CHICAGO IL 60611-1901		2. 4 CITY-S	ST-ZIP					
TITLE	V	☐ DELETE	3.1 TITLE		_ ·	-	☐ Change	■ Addition	
NAME	BONEHAM, PAMELA SCHMIDT	-	3.2 NAME	(
STREET ADDRESS	875 N. MICHIGAN AVE., 41ST F	L.	3.3 STREE	TADDRESS					
CITY-ST-ZIP	CHICAGO IL 60611-1901		3.4. CITY-5	ST-ZIP					
TITLE	٧.	☐ DELETE	4.1 TITLE				Change	Addition	
NAME	DEMAY, TRACY L		4, 2 NAME						
STREET ADDRESS	101 CALIFORNIA ST., 26TH FL.		4.3 STREE	TADORESS					
CITY-ST-ZIP	SAN FRANCISCO CA 94111-58	53	4.4 CITY-S	T-ZIP					
TITLE	٧	☐ DELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME	STEPPE, STEPHEN M		5.2 NAME						
STREET ADDRESS	101 CALIFORNIA ST., 26TH FL.		5.3 STREE	T ADDRESS					
CITY-ST-ZIP	SAN FRANCISCO CA 94111-58	53	5.4 CITY-S	T-ZtP					
TITLE	V	☐ DELETE	6.1 TITLE				☐ Change	☐ Addition	
NAME	THOMPSON, GARY L		6.2 NAME						
STREET ADDRESS	875 N. MICHIGAN AVE., 41ST F	E.	6.3 STREE	T ADDRESS				Ì	
CITY-ST-ZIP	CHICAGO IL 60611-1901		6.4 CITY-S	T-ZIP					

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: