2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # F99000003750 03-11-2005 90320 046 ***150.00 1. Entity Name FIELDSIDE PROPERTIES, INC. Principal Place of Business Mailing Address 50025155 C/O ROBERT E GOLDBERG/UBS RLTY INV. LLC C/O ROBERT E GOLDBERG/UBS RLTY INV, LLC 51 WEST 52ND STREET - 14TH FL 51 WEST 52ND STREET - 14TH FL NEW YORK, NY 10019 NEW YORK, NY 10019 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. 03042005 Cha-P CR2E034 (10/03) City & State City & State 4 FEI Number Applied For 13-3961293 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7: Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City 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. 6760 SIGNATURE nature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. President James P. Boudenuyle. 51 V. 57 AV St. - 14th Flc. Delete Change Addition TITLE TITLE HAUNSS, HENRY W JR NAME NAME STREET ADDRESS 51 WEST 52ND STREET - 14TH FL STREET ADDRESS NEW YORK, NY 10019 CITY-ST-ZIP New York, NY 10019 CITY-ST-ZIP Delete ☐ Change Addition THUE TITLE NAME DECKER, FRANCIS J JR NAME 51 WEST 52ND STREET - 14TH FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10019 CITY-ST-ZIP Addition ☐ Change _ Delete TITLE TITLE FEINBERG STUART NAME N. 520 51 -1416 NAME STREET ADDRESS STREET ADDRESS 51 WEST 52ND STREET-14TH FL CITY ST-ZIP NEW YORK, NY 10019 CITY-ST-ZIE ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY - ST - ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP 12. 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 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

FILED Mar 11, 2005 8:00 am