


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2008 8:00 am**  
**Secretary of State**

04-17-2008 90011 043 \*\*\*150.00

<b>DOCUMENT # F99000003750</b> 1. Entity Name FIELDSEIDE PROPERTIES, INC.					
Principal Place of Business C/O UBS REALTY INVESTORS LLC 242 TRUMBULL STREET HARTFORD, CT 06103-1212			Mailing Address C/O UBS REALTY INVESTORS LLC 242 TRUMBULL STREET HARTFORD, CT 06103-1212		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>13-3961293</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
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 <span style="float: right;"><b>FL</b></span> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST FEINBERG, STUART <input type="checkbox"/> Delete 51 WEST 52ND STREET-14TH FL NEW YORK, NY 10019		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Bryan Petronella <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 242 Trumbull St., 4th Floor Hartford, CT 06103-1212	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOUDERAU JR., JAMES P <input checked="" type="checkbox"/> Delete 51 W. 52ND ST.-14TH FLOOR NEW YORK, NY 10019		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P James P. Bouderau, Jr. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 242 Trumbull St., 4th Floor Hartford, CT 06103-1212	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> <u>James P. Bouderau, Jr.</u> <b>James P. Bouderau, Jr.</b> <b>4/±0/1008</b> <b>(860) 616-9154</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					