2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2011
Secretary of State

DOCUMENT# J03775

Entity Name: STOCKTON PLAZA, INCORPORATED

Current Principal Place of Business:

4 NEW YORK PLAZA
FLOOR 19
NEW YORK, NY 10004 US

New Principal Place of Business:

Current Mailing Address:

4 NEW YORK PLAZA
FLOOR 19
NEW YORK, NY 10004 US

New Mailing Address:

FEI Number: 59-2650314 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: DURDAN, SALLY
Address: 270 PARK AVENUE
City-St-Zip: NEW YORK, NY 10017 US

Title: T
Name: FITZGERALD, LISA
Address: 270 PARK AVENUE
City-St-Zip: NEW YORK, NY 10017 US

Title: D
Name: HORAN, ANTHONY
Address: 270 PARK AVENUE
City-St-Zip: NEW YORK, NY 10017 US

Title: S
Name: MEADE, COLLEEN
Address: 4 NEW YORK PLAZA
City-St-Zip: NEW YORK, NY 10004 US

Title: D
Name: LIPSITZ, MICHAEL
Address: 10 SOUTH DEARBORN
City-St-Zip: CHICAGO, IL 60603 US

Title: D
Name: DURDAN, SALLY
Address: 270 PARK AVENUE
City-St-Zip: NEW YORK, NY 10017 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: COLLEEN MEADE S 04/04/2011

Electronic Signature of Signing Officer or Director Date