8/24/01-90006-025-$550.00-$550.00

APPROVED AND FILED

01 SEP 10 PM 4:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M04123

1. Entity Name
Related Roney Plaza, Inc.

C0075677

Principal Place of Business	Mailing Address
C/O The Related companies, L.P. 625 Madison Avenue ATTN: Legal Dept. New York, New York 10022	C/O The Related Companies, L.P. 625 Madison Avenue ATTN: LEgal Dept. New York, New York 10022

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 58-1853996 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

City: Tallahassee FL Zip Code: 32301

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.

SIGNATURE: BRIAN COURTNEY, ASST. V.P. DATE: 9/10/01

Signature, typed or printed name of the registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT MCGUIRE, SUSAN 625 MADISON AVENUE NEW YORK, NY 10022	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEPHEN M. ROSS 625 MADISON AVENUSE NEW YORK, NY 10022	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PEREZ, JORGE 625 MADISON AVENUE NEW YORK, NY 10022	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MICHAEL BRENNER 625 MADISON AVENUE NEW YORK, NY 10022	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V FRIED, J. MICHAEL 625 MADISON AVENUE NEW YORK, NY 10022	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BOESKY, STUART 625 MADISON AVENUE NEW YORK, NY 10022	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	900004579289--3	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ALAN P. HIRMES 625 MADISON AVENUE NEW YORK, NY 10022	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MCGUIRE, SUSAN 625 MADISON AVENUE NEW YORK, NY 10022	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S TERESA WICELINSKI 625 MADISON AVENUE NEW YORK, NY 10022	☐ Change ☐ Addition SP

CR2E034 (11/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN P. HIRMES 7/18/01 212-421-5333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #