


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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99 JUN 23 PM 4:05

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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<b>FILING FEE</b> \$ 188.75	<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company  <b>EASTDIL REALTY COMPANY, L.L.C., L.C.</b> <b>40 WEST 57TH STREET</b> <b>21ST FLOOR</b> <b>NEW YORK NY 10019</b>	<b>DOCUMENT # M95000000007</b>
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1a. Principal Place of Business Address  <b>40 WEST 57TH STREET</b> <b>21ST FLOOR</b> <b>NEW YORK NY 10019</b>
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2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip Country	2a. Mailing Address  Suite, Apt. #, etc.  City & State  Zip Country
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3. Date Organized or Qualified <b>01/06/1995</b>	3a. State of Formation <b>NY</b>
4. FEI Number <b>13-3791043</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report <b>05/01/1998</b>	6. Certificate of Status Desired <b>\$8.75 Additional Fee Required</b> <input type="checkbox"/>

7. Name and Address of Current Registered Agent  <b>NATIONAL CORPORATE RESEARCH, LTD.</b> <b>1406 HAYS STREET, SUITE #2</b> <b>TALLAHASSEE FL 32301</b>
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8. Name and Address of New Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City Zip Code <b>FL</b>
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when replacing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	LAMBERT, BENJAMIN V	40 WEST 57TH STREET	NEW YORK NY
MGR	MARCH, ROY H	10100 SANTA MONICA BLVD.	SANTA MONICA CA
<del>MGR</del>	<del>ANTONCIC, MARK A</del>	<del>40 WEST 57TH STREET</del>	<del>NEW YORK NY</del>
MGR	MAGGIN, WAYNE L	40 WEST 57TH STREET	NEW YORK NY
MGR	DRETZKA, KEVIN R	10100 SANTA MONICA BLVD.	SANTA MONICA CA
MGR	WEBER, JEFFREY N	10100 SANTA MONICA BLVD.	SANTA MONICA CA

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\*\*\*\*588.75 \*\*\*\*588.75  
JUN 29 1999

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.
SIGNATURE: <i>Jonathan T. Waller</i> 6/18/99 212 315-7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER