

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

1995 APR 12 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. McTham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # R00525

1. Corporation Name

Tishman Speyer Properties, Inc.

Principal Place of Business

**c/o Tishman Speyer Properties
520 Madison Avenue, 6th Floor
New York, NY 10022**

Mailing Address

**c/o Tishman Speyer Properties
520 Madison Avenue, 6th Floor
New York, NY 10022**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/09/1984

3a. Date of Last Report

07/26/1994

4. FEI Number

13 3204710

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30 Country

9. Name and Address of Current Registered Agent

**The Prentice Hall Corporation System Inc.
1201 Hays Street
Suite 105
Tallahassee, FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**C/D
Tishman, Robert V.
520 Madison Avenue
NY, NY 10022**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**S/D
Roth, Gary W.
520 Madison Avenue
NY, NY 10022**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**P/D
Speyer, Jerry I.
520 Madison Avenue
NY, NY 10022**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**V
Nathan, Andrew J.
520 Madison Avenue
NY, NY 10022**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**T
Augarten, David
520 Madison Avenue
NY, NY 10022**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

100001455361

-04/13/95--01068 Sample 0121 Addition

******200.00 ****200.00**

Change Addition

Change Addition

Change Addition

Change Addition

*raw
4/12/95*

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an amendment with an address.

SIGNATURE:

David Augarten, Treasurer 3/27/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Signature #

