2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 03, 2004 08:00 AM **DOCUMENT # P01000055373 Secretary of State** 1. Entity Name LT BY THE SEA, INC. Mailing Address Principal Place of Business C/O SENTINEL REAL ESTATE 1251 AVENUE OF THE AMERICAS, 36 FLOOR NEW YORK NY 10020 C/O SENTINEL REAL ESTATE 1251 AVENUE OF THE AMERICAS, 36 FLOOR NEW YORK NY 10020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. MOORE CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 58-2627671 Not Applicable Country Ζip Country **\$8.75** Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 E. PARK AVENUE TALLAHASSEE FL 32301 City Zin 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change TITLE PD ☐ Delete HILE NAME STREICKER, JOHN H NAME Unn000075188 03/0<mark>3/</mark>04-80050-801 15**0.0**0 1251 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP NEW YORK NY 10020 Change Change Addition TITLE ☐ Delete TITLE WEINBERGER, MICHAEL J NAME NAME STREET ADDRESS 1251 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10020 CITY - ST- ZIP ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME TIETJEN, GEORGE STREET ADDRESS STREET ADDRESS 1251 AVENUE OF THE AMERICAS, 36TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10020 ☐ Change ☐ Addition TITLE Delete TITLE WATTERS, CONNELL J NAME NAME 1251 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS STREET ADDRESS NEW YORK NY 10020 CITY-ST-7IP DITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TiTiF TITLE KLEIN, JAY NAME NAME 1251 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS STREET ADDRESS NEW YORK NY 10020 CITY-ST-ZIP CITY-ST-ZIP AS ☐ Change ☐ Addition ☐ Delete TITE E MILE GUTTENBERG, ELLYN NAME NAME 1251 AVENUE OF THE AMERICAS, 36TH FLOOR STREET ADDRESS STREET ADDRESS NEW YORK NY 10020 CITY-ST-ZIP CITY-ST-ZIP

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ellum Mutturburg Asst. Ascu 1/27/04 2/3-408-8929