

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 13, 2001 8:00 am
Secretary of State**

02-13-2001 90584 047 ***150.00

DOCUMENT # P02962

1. Entity Name

SB PARTNERS REAL ESTATE CORPORATION

Principal Place of Business

666 FIFTH AVENUE
26TH FLOOR
NEW YORK NY 10103
US

Mailing Address

666 FIFTH AVENUE
26TH FLOOR
NEW YORK NY 10103
US**715804**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1251

Avenue of the Americas

Suite, Apt. #, etc.

36th Floor

City & State

New York, NY

3. Mailing Address 1251

Avenue of the Americas

Suite, Apt. #, etc.

36th Floor

City & State

New York, NY4. FEI Number **13-2636431**

Applied For

Not Applicable

Zip
10020

Country

USAZip
10020

Country

USA5. 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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

Name

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

City

FL

Zip 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 ☐ Delete
NAME **PD**
STREET ADDRESS **STREICKER, JOHN H.**
CITY-ST-ZIP **666 FIFTH AVENUE
N.Y. NY**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1251 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10020**TITLE ☐ Delete
NAME **S**
STREET ADDRESS **KENNY, MICHAEL**
CITY-ST-ZIP **666 FIFTH AVENUE
NEW YORK NY 10103**TITLE ☒ Change ☐ Addition
NAME **VS**
STREET ADDRESS **1251 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10020**TITLE ☐ Delete
NAME **D**
STREET ADDRESS **CASSIDY, MILLIE C.**
CITY-ST-ZIP **666 FIFTH AVENUE
NY. NY**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1251 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10020**TITLE ☐ Delete
NAME **D**
STREET ADDRESS **WEINER, DAVID W.**
CITY-ST-ZIP **666 FIFTH AVENUE
N.Y., N Y**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1251 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10020**TITLE ☐ Delete
NAME **D**
STREET ADDRESS **KURTZ, CHRISTINE C.**
CITY-ST-ZIP **666 FIFTH AVENUE
NEW YORK NY**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1251 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10020**TITLE ☐ Delete
NAME **D**
STREET ADDRESS **WEINBERGER, MICHAEL**
CITY-ST-ZIP **666 FIFTH AVENUE
NEW YORK NY**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1251 Avenue of the Americas**
CITY-ST-ZIP **New York, NY 10020**

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:

Ellyn Baron

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ellyn Baron, Assistant Secretary

1/29/01

Date

212-408-5000

Daytime Phone #

CR2E034 (10/00)

SB PARTNERS REAL ESTATE CORPORATION
#P02962

Officers (continued):

AS
Baron, Ellyn
1251 Avenue of the Americas
New York, NY 10020

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715804