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FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P08099 (4)
1. Corporation Name
FOURTH DEVELOPMENT FUND INC.



Principal Place of Business Mailing Address
% TAX DEPT. 9TH FLOOR % TAX DEPT. 9TH FLOOR
1000 HARBOR BOULEVARD 1000 HARBOR BOULEVARD
WEEHAWKEN NJ 07087 WEEHAWKEN NJ 07087

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/14/1985	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-3151296	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name Corporation Service Co.
82 Street Address (P.O. Box Number is Not Acceptable)
1201 Hays St.
83
84 City Tallahassee FL 85 Zip Code 32301

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 Mary J. Flowers asst. vice president 4-28-98
Signature of person in care of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SVP	1.1 TITLE	
NAME	ARNOLD, WALTER V	1.2 NAME	
STREET ADDRESS	1000 HARBOR BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	
NAME	RUBIN, BRUCE	2.2 NAME	
STREET ADDRESS	1000 HARBOR BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	HAUGHEY, DOROTHY F.	3.2 NAME	
STREET ADDRESS	1000 HARBOR BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ 07087	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	BOLAND, THOMAS	4.2 NAME	Boland, Thomas
STREET ADDRESS	1000 HARBOR BLVD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	4.4 CITY-ST-ZIP	
TITLE	SVP	5.1 TITLE	
NAME	SNYDER, JAMES	5.2 NAME	
STREET ADDRESS	1000 HARBOR BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	5.4 CITY-ST-ZIP	
TITLE	AT	6.1 TITLE	
NAME	LEVINE, KEN	6.2 NAME	
STREET ADDRESS	1000 HARBOR BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	6.4 CITY-ST-ZIP	

14. 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 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 of 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 attachment with an address.

SIGNATURE Ken Levine 4/27/98 (200) 200-1130

CR2E034 (10/97)