

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P08387 (3)

1. Entity Name

Dean Witter Realty Growth Properties Inc.

Principal Place of Business

c/o Morgan Stanley
Dean Witter & Co.
1585 Broadway
New York, NY 10036

Mailing Address

c/o Morgan Stanley Tax De
1221 Ave. of the Americas, 23 FL
New York, NY 10020**FILED**
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90133 002 ***150.00

A0063349

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 13-3286819		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent

CT Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	AVP	<input type="checkbox"/> Delete
NAME	Lou Palladino	
STREET ADDRESS	One South Field Road	
CITY-ST-ZIP	Edison, NJ 08820	
TITLE	P/D	<input type="checkbox"/> Delete
NAME	Hardman, Jr., E. Davisson	
STREET ADDRESS	3 Lodger Street	
CITY-ST-ZIP	Rye, NY 10580	
TITLE	V	<input type="checkbox"/> Delete
NAME	Austin, Robert B.	
STREET ADDRESS	17 Manitou Circle	
CITY-ST-ZIP	Westfield, NJ 07090	
TITLE	V	<input type="checkbox"/> Delete
NAME	Dipietro, Ronald J.	
STREET ADDRESS	24-91 Street	
CITY-ST-ZIP	Brooklyn, NY 11209	
TITLE	C/D	<input type="checkbox"/> Delete
NAME	Smith, William B.	
STREET ADDRESS	423 Hillside Avenue	
CITY-ST-ZIP	Westfield, NJ 07090	
TITLE	S/D	<input type="checkbox"/> Delete
NAME	Carman, Ronald T.	
STREET ADDRESS	436 N. Village Avenue	
CITY-ST-ZIP	Rockville Center, NY 11570	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 duly empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01

Date

(212) 762-6909

Daytime Phone #

CR2E034 (11/00)