


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P10622 (9) 1. Corporation Name DBL PROPERTIES CORPORATION			
Principal Place of Business 230 PARK AVENUE SUITE 2400 NEW YORK NY 10169		Mailing Address 230 PARK AVENUE SUITE 2400 NEW YORK NY 10169-2400	
2. Principal Place of Business 21 850 Third AVENUE Suite, Apt. #, etc. 22 NINETEENTH FLOOR City & State 23 NEW YORK, N.Y. Zip 24 10022		2a. Mailing Address 26 850 Third AVENUE Suite, Apt. #, etc. 27 NINETEENTH FLOOR City & State 28 NEW YORK, N.Y. Zip 29 10022	
9. Name and Address of Current Registered Agent CAPOUANO, AL % DEAN MEAD EGERTON BLOODWORTH ET AL 800 NORTH MAGNOLIA AVENUE ORLANDO FL 33803		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP P CLEMENTS, WILLIAM D SUITE 2400, 230 PARK AVENUE NEW YORK NY 10169 S GAUTHIER, ROBERT SUITE 2400, 230 PARK AVENUE NEW YORK NY 10169			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 850 Third AVENUE, NINETEENTH FLR. NEW YORK, N.Y. 10022 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 850 Third AVENUE NINETEENTH FLOOR NEW YORK, N.Y. 10022			
14. I do 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 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 attachment with an address.			



SIGNATURE: *William D Clements*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97

Date

(212) 822-2246

Daytime Phone

0006787

CR2E034 (9/96)