FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(8)

LANCELOT REAL ESTATE CORPORATION

US US O9/17/1987 2. Principal Place of Business 26. Mailing Address 27. Suite, Apt. #, etc. 28. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 29. City & State 20. City & State 20. Country 21. Country 22. Exp. Country 23. Suite, Apt. #, etc. 29. Country 20. Country 21. Country 22. Suite, Apt. #, etc. 29. Country 20. Country 21. Country 22. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 29. Country 20. Country 21. Country 21. Country 22. Suite, Apt. #, etc. 29. Country 20. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 20. Suite, Apt. #, etc. 21. Country 20. Suite, Apt. #, etc. 21. Country 21. Country 22. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 20. Country 20. Suite, Apt. #, etc. 20. Country 21. Country 22. Country 23. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 20. Suite, Apt. #, etc. 21. Suite, Apt. #, etc. 21. Suite, Apt. #, etc. 22. Country 23. Suite, Apt. #, etc. 25. Country 26. Election Campaign Financing 27. Trust Fund Contribution 28. This corporation has liability for intangible technology 29. Name and Address of Current Registered Agent 29. Name and Address of New Registered 29. Name and Address of New Registered 29. Name and Address of New Registered 29. Suite, Apt. #, etc. 20. Name and Address of New Registered 21. Name and Address of New Registered 22. Street Address (P.O. Box Number is Not Acceptable) 2	e of Last Report 05/01/1995 Applied For Not Applicable
450 LEXINGTON AVE #3800 NEW YORK NY 10017 US 2. Principal Place of Business 2. A Mailing Address 2. Expression Place of Business 3. Date Incorporated or Qualified 13s. Date 109, 113-3375069 3. Date Incorporated or Qualified 13s. Date 109, 113-3375069 3. Date Incorporated or Qualified 13s. Date 109, 113-3375069 3. Expective Place of Expression Plac	05/01/1995 Applied For Not Applicable
US US Og/17/1987 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Mailing Add	Applied For Not Applicable
2. Principal Place of Business 28 13-3375069 Suite, Apt. #, etc. Scertificate of Status Desired	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.	
27 City & State City & Statutes City & State City & Statutes City & Statutes City & State City & C	
City & State City & State Zip Zip Country Zip Country Zip Signame, byteo or printed rame of legistered agent and tile if applicable. Signame, byteo or printed rame of legistered agent and tile if applicable. Name City & State City & State Country Zip Country Zip Country Zip Country B. This corporation has liability for intangible te Florida Statutes. In the state of Florida Statutes. B1 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 B2 Street Address (P.O. Box Number is Not Acceptable) B3 Street Address (P.O. Box Number is Not Acceptable) B4 City F1 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 chor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signame, byteo or printed name of registered agent and tile if applicable. NOTE Regulators Agent sequelure required when rendering) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. STREET ADDRESS CITY-SI-ZIP NEW YORK NY	\$8.75 Additional Fee Required
Trust Fund Contribution Trust Fund Contr	\$5.00 May Be
Zip Country Zip Country Zip Country Zip Country 30 Statutes Yes No No No No No No No N	Added to Fees
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 chor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tile if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TILLE NAME SMITH, T.J. STREET ADDRESS CITY-SI-ZIP NEW YORK NY 10. Name and Address of New Registered B1 Name Not Acceptable) 10. Name and Address of New Registered B1 Name Not Acceptable) 11. Name Not Acceptable) 12. PL Not Acceptable) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND STREET ADDRESS CITY-SI-ZIP NEW YORK NY 14. CITY-SI-ZIP NEW YORK NY	ax under s 199.032,
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 B4 City FL 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 cheor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. INDIE Registered Agent signature required when renstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS ANI TITLE PSD SIRET ADDRESS CITY-SI-ZIP NEW YORK NY DELETE 1.1 STREET ADDRESS CITY-SI-ZIP NEW YORK NY	Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 B4 City FL 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 cheor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. NOTE Projected Agent signature required when renstating! DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND STREET ADDRESS SIRRET ADDRESS 45 ROCKEFELLER PLAZA NEW YORK NY DELETE 1.1 ITTLE 1.2 NAME 1.3 STREET ADDRESS 1.1 STREET ADDRESS 1.4 City FL	rigoti.
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 B4 City FL 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 che 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 familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and bits if applicable. NOTE Registered Agent signature required when renetating! DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS ANI TILLE PSD DELETE 1. 1 TILLE STREET ADDRESS 45 ROCKEFELLER PLAZA NEW YORK NY DELETE 1.3 STREET ADDRESS 1.4 City FL	
PLANTATION FL 33324 83 84 City FL 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 chor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and bild if applicable. INOTE Projected agenture required when renstating! DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE PSD DELETE 1. TITLE 1. TITLE STREET ADDRESS 45 ROCKEFELLER PLAZA NEW YORK NY DERETS 14 City FL City FL State of Florida Statutes, the above-named corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement for the purpose of chor corporation submits this statement corporation submits this statement for chor corporation submits th	
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 chor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed rame of registered agent and bits if applicable. [NOTE Projection Agent agrature required when renstating]. DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS THEE PSD DELETE 1.1 TITLE NAME SMITH, T.J. STREET ADDRESS 45 ROCKEFELLER PLAZA 1.3 STREET ADDRESS CITY-SI-ZIP NEW YORK NY	
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 chor 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. [NOTE Registered Agent signature required when renefating] DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS ANI III.LE PSD DELETE 1.1 TITLE SMITH, T.J. 1.2 NAME SMITH, T.J. 1.2 NAME 1.3 STREET ADDRESS 45 ROCKEFELLER PLAZA 1.3 STREET ADDRESS NEW YORK NY 1.4 CITY-S1-ZIP NEW YORK NY	85 Zip Code
familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signishire, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PSD DELETE NAME SMITH, T.J. STREET ADDRESS 45 ROCKEFELLER PLAZA CITY-S1-ZIP NEW YORK NY DATE NOTE Projecterod Agent signature required when reinstating) DATE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP NEW YORK NY	anging its registered office
familiar with, and accept the obligations of, Section 607.0500, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and blic if applicable. (NOTE Registered Agent signature required when renstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS THLE PSD DELETE 1.1 TITLE NAME SMITH, T.J. STREET ADDRESS CITY-S1-ZIP NEW YORK NY DELETE 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	s registered agent. I am
Signature. Typed or printed name of registered agent and tills if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TILLE PSD DELETE NAME SMITH, T.J. STREET ADDRESS CITY-S1-ZIP NEW YORK NY DELETE 1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-S1-ZIP NEW YORK NY DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TITLE PSD NAME SMITH, T.J. STREET ADDRESS CITY-SI-ZIP NEW YORK NY 13. STREET ADDRESS 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP NEW YORK NY 1.4 CITY-SI-ZIP	D DISECTORS IN 18
THLE	Change Addition
STREET ADDRESS 45 ROCKEFELLER PLAZA CITY-ST-ZIP NEW YORK NY 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP	C outside C version
CITY-SI-ZIP NEW YORK NY 14 CITY-SI-ZIP	
CHI-SI-SIF	
	Change Addition
■	•
	r
NEW YORK NY 24 City-St-Zip Boston, MA U2110	
TITLE D DELETE 3 1 TITLE	Change Addition
NAME WEAVER, R.B. 32 NAME	
STREET ADDRESS 1 CHASE MANHATTAN PLAZA 3.3 STREET ADDRESS Wheat Lane	
CIIY-SI-ZIP NEW YORK NY 34 CITY-SI-ZIP Darien, CT 06820	⊠ Change
TITLE VPAS DELETE 4.1 TITLE	Change Addition
NAME REEVES, R.M. AMBRISCO Advisors. Inc	
STREET ADDRESS 150 E. 45TH ST. 43 STREET ADDRESS 265 Franklin St.; 18th Floor	r
CITY-SI-ZIP NEW YORK NY 44 CITY-SI-ZIP Boston, MA 02110	Change Addition
THEE D DELETE 5.1 TITLE	F 41.4.9. F 12.2.2.4.
NAME RUSBY, G. 52 NAME	
STREET ADDRESS SHELL CENTRE 5.3 STREET ADDRESS	
CITY-ST-ZIP	☐ Change ☐ Addition
	_
NAME NICHARDOUT, II. U.	
SIREET ADDRESS 67 BOWMAN DRIVE 6.3 STREET ADDRESS 64 CITY-S1-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 or Block 13 or changed, or or an attachment with an address. Thomas J. Smith ARIA 17, 1616 SIGNATURE: