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May 09 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 # P21914 (7)
1. Corporation Name
METROPOLITAN TOWER REALTY COMPANY, INC.



Principal Place of Business
ONE MADISON AVENUE
AREA 8E
NEW YORK NY 10010
US

Mailing Address
ONE MADISON AVENUE
AREA 8E
NEW YORK NY 10010-3603
US

3. Date Incorporated or Qualified
11/30/1988

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
13-3170235

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(NOTE: Registered Agent signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☐ DELETE
NAME	AMHOLT, FEDERCK E.	
STREET ADDRESS	7 NORWALK AVENUE	
CITY-ST-ZIP	WESTPORT CT	
TITLE	VD	☐ DELETE
NAME	DIGNEY, JAMES B.	
STREET ADDRESS	20 POPLAR PLAIN ROAD	
CITY-ST-ZIP	WESTPORT CT	
TITLE	SD	☒ DELETE
NAME	WILCOMES, RONALD H.	
STREET ADDRESS	9 LYNCREST DRIVE	
CITY-ST-ZIP	PARAMUS NJ	
TITLE	C/T	☐ DELETE
NAME	TYPERMASS, ARTHUR	
STREET ADDRESS	ONE MADISON AVENUE	
CITY-ST-ZIP	NEW YORK NY 10010	
TITLE	VD	☒ DELETE
NAME	GARESCHKE, THOMAS K.	
STREET ADDRESS	45 COMMODORE RD	
CITY-ST-ZIP	CHAPPAQUA NY	
TITLE	AT	☐ DELETE
NAME	BRASH, STEVEN J.	
STREET ADDRESS	332 EAST 84TH STREET	
CITY-ST-ZIP	NEW YORK NY	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☒ Addition
32 NAME	V/S/D RICHARD S. COLLINS
33 STREET ADDRESS	72 WEST BROTHER DRIVE
34 CITY-ST-ZIP	GREENWICH, CT
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☒ Addition
52 NAME	V/D ROBERT N. JENKINS
53 STREET ADDRESS	1185 PARK AVENUE
54 CITY-ST-ZIP	NEW YORK, NY
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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:

Steven J. Brash

Steven J. Brash 4/29/97

612.578-6494

CR2E034 (9/96)