

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 # **P26463** (0)

1. Corporation Name

TCW REALTY FUND II HOLDING COMPANY

Principal Place of Business

**%TCW REALTY ADVISORS
865 SO. FIGUEROA ST., STE. 3500
LOS ANGELES CA 90071
US**

Mailing Address

**%TCW REALTY ADVISORS
865 SO. FIGUEROA ST., STE. 3500
LOS ANGELES CA 90071
US**

2. Principal Place of Business **c/o**

21 **Westmark Realty Advisors**

Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

24

2a. Mailing Address **Same as 2.**

26 **L.L.C.**

Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

29

g. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

3. Date Incorporated or Qualified

10/16/1989

3a. Date of Last Report

08/04/1995

4. FEI Number

95-3910382

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

83 Suite 105

84 City **Tallahassee**

7000001814257

-05/03/96 -01053-4035

******208-FL****208-29**

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 of registered agent or registered agent in lieu of registered agent

Signature of registered agent or registered agent in lieu of registered agent

Date

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **MARTIN, VINCENT F., JR.**
STREET ADDRESS **865 SOUTH FIGUEROA, STE. 3500**
CITY-STATE-ZIP **LOS ANGELES CA 90017**

TITLE **EVD** ☐ DELETE

NAME **ZARROW, STANTON H.**
STREET ADDRESS **865 SOUTH FIGUEROA, STE. 3500**
CITY-STATE-ZIP **LOS ANGELES CA 90017**

TITLE **S** ☐ DELETE

NAME **STARK, TODD E.**
STREET ADDRESS **865 SOUTH FIGUEROA, STE. 3500**
CITY-STATE-ZIP **LOS ANGELES CA 90017**

TITLE **TD** ☒ DELETE

NAME **GRANTHAM, RICHARD R.**
STREET ADDRESS **865 SOUTH FIGUEROA, STE. 3500**
CITY-STATE-ZIP **LOS ANGELES CA 90017**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **D/P** ☒ Change ☒ Addition

12 NAME **Clotfelter, Richard C.**
13 STREET ADDRESS **865 S. Figueroa St., Ste. 3500**
14 CITY-STATE-ZIP **Los Angeles, CA 90017-2543**

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE ☒ Change ☒ Addition

42 NAME **T Romanak, Laurie E.**
43 STREET ADDRESS **865 S. Figueroa St., Ste. 3500**
44 CITY-STATE-ZIP **Los Angeles, CA 90017-2543**

51 TITLE ☐ Change ☒ Addition

52 NAME **D/ SR. VP**
53 STREET ADDRESS **Scott E. Tracy**
54 CITY-STATE-ZIP **865 S. Figueroa St., Suite 3500**
Los Angeles, CA 90017

61 TITLE ☐ Change ☒ Addition

62 NAME **SR. VP**
63 STREET ADDRESS **Joseph W. Markling**
64 CITY-STATE-ZIP **865 S. Figueroa St., Suite 3500**
Los Angeles, CA 90017

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the protection of the attorney-client privilege. 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 or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Todd Evan Stark, Secretary

4/30/96

(213) 683-4200

Customer Phone #

CR2E034 (12/95)