

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

FILED  
Apr 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P33654 (5)  
1. Corporation Name  
BEAR STEARNS REALTY PARTNERS CORPORATION



Principal Place of Business  
245 PARK AVE  
SUITE 500  
NEW YORK NY 10167  
US

Mailing Address  
115 S. JEFFERSON ROAD  
ATTN: NANCY LOPEZ  
WHIPPANY NJ 07981  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/22/1991	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-3542026	Applied For Not Applicable
22	City & State	27	City & State	6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

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

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FORDYCE, DONALDA	1.2 NAME	
STREET ADDRESS	245 PARK AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10167	1.4 CITY-ST-ZIP	
TITLE	F <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYDEN, WILLIAM H.	2.2 NAME	William H. Hayden
STREET ADDRESS	245 PARK AVE	2.3 STREET ADDRESS	245 Park Avenue
CITY-ST-ZIP	NEW YORK NY 10167	2.4 CITY-ST-ZIP	New York, NY 10167
TITLE	DP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSE, RALPH W.	3.2 NAME	
STREET ADDRESS	245 PARK AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	3.4 CITY-ST-ZIP	
TITLE	EVD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOX, PETER B.	4.2 NAME	Please see Attached.
STREET ADDRESS	THREE FIRST NATIONAL PLAZA	4.3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL	4.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEHMAN, MARK E.	5.2 NAME	
STREET ADDRESS	845 PARK AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	5.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONTGORIS, WILLIAM J.	6.2 NAME	
STREET ADDRESS	245 PARK AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	6.4 CITY-ST-ZIP	

14. 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 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.

CR2E034 (10/97)

## Bear Stearns Realty Partners Corporation

NAME	TITLE	BUSINESS ADDRESS
Donalda L. Fordyce	Chairman of the Board/ <b>Director</b>	A
Ralph W. Rose	President/ <b>Director</b>	A
Peter B. Fox	Executive Vice President/ <b>Director</b>	B
Mark E. Lehman	Secretary	A
William J. Montgoris	Treasurer	A
Gerald R. Cummins Jr.	Chief Operating Officer/ <b>Director</b>	C
Thomas M. Flexner	<b>Director</b>	A
William H. Hayden	<b>Director</b>	A

A:  
245 Park Avenue  
New York, NY 10167

B:  
One Metrotech Center North  
Brooklyn, NY 11201-3859

C:  
575 Lexington Avenue  
New York, NY 10022