

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P36959

1. Entity Name

RESOURCES SUPERVISORY MANAGEMENT CORP.

**FILED**  
**Feb 26, 2000 8:00 am**  
**Secretary of State**

02-26-2000 90024 015 \*\*\*150.00

Principal Place of Business

Mailing Address

C/O NORTHSTAR PRESIDIO MGMT CO LLC  
SUITE 270-411 W PUTNAM AVE  
GREENWICH CT 06830  
US

C/O NORTHSTAR PRESIDIO MGMT CO LLC  
SUITE 270-411 W PUTNAM AVE  
GREENWICH CT 06830  
US

2. Principal Place of Business

3. Mailing Address

Fire Cambridge Center

Fire Cambridge Center

Suite, Apt. #, etc.

Suite, Apt. #, etc.

9th Floor

9th Floor

City & State

City & State

Cambridge MA

Cambridge MA

Zip

Zip

02142 USA

02142 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

13-3638619

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST.  
STE. 105  
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete
	P. SABELLA, RICHARD	SUITE 270-411 W PUTNAM AVE	GREENWICH CT 06830	
	SVPC SCHACHTER, LAWRENCE R	SUITE 270-411 PUTNAM AVE	GREENWICH CT 06830	<input checked="" type="checkbox"/> Delete
	EVP ROTHSCHILD, ALLAN B	SUITE 270-411 W PUTNAM AVE	GREENWICH CT 06830	<input checked="" type="checkbox"/> Delete
	VP HUMBER, CHARLES	SUITE 270-411 W PUTNAM AVE	GREENWICH CT 06830	<input checked="" type="checkbox"/> Delete
	VPTS REARDON, KEVIN	SUITE 270-411 W PUTNAM AVE	GREENWICH CT 06830	<input checked="" type="checkbox"/> Delete
				<input checked="" type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	President/Director Michael Ashner	Fire Cambridge Center 9th Floor	Cambridge, MA 02142		
	Vice President/Asst Sec Peter Braverman	Fire Cambridge Center 9th Floor	Cambridge, MA 02142		
	VP/Sec Lara Sweeney	Fire Cambridge Center 9th Floor	Cambridge MA 02142		
	VP/Treasurer/Asst Sec Carolyn Tiffany	Fire Cambridge Center 9th Floor	Cambridge, MA 02142		
	Asst Secretary Allison Forrester	Fire Cambridge Center	Cambridge, MA 02142		
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)