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 # **P39221** **(7)**

1. Corporation Name

TOWN CENTER AT BOCA RATON PROMOTIONS, INC.

Principal Place of Business

CORPORATE PROPERTY INVESTORS
305 EAST 47TH ST.
NEW YORK NY 10017

Mailing Address

CORPORATE PROPERTY INVESTORS
305 EAST 47TH ST.
NEW YORK NY 10017

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City, & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: **06/11/1992**

3a. Date of Last Report: **05/17/1995**

4. FEI Number: **65-0328614** 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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	CILIA, JOSEPH P	
STREET ADDRESS	84-68 246TH ST	
CITY-ST-ZIP	FLORAL PARK NY	
TITLE	VP	☐ DELETE
NAME	JOHNSON, RODERICK K	
STREET ADDRESS	26 CEDAR LAWN RD	
CITY-ST-ZIP	IRVINGTON NY	
TITLE	S	☐ DELETE
NAME	ROSAL, DULCE	
STREET ADDRESS	92-27 54TH AVE	
CITY-ST-ZIP	ELMHURST NY	
TITLE	ASAT	☐ DELETE
NAME	LANGFORD, ROYE	
STREET ADDRESS	340 EAST 51ST ST, 8-B	
CITY-ST-ZIP	NEW YORK NY	
TITLE	D	☐ DELETE
NAME	TURNER, HENRY B	
STREET ADDRESS	6116 YUCCA ROAD	
CITY-ST-ZIP	PARADISE VALLEY AZ	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roye Langford 3-15-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roye Langford, Asst. Secretary

Date

CR2E034 (12/95)