FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 02, 2001 8:00 am DOCUMENT # P95000062921 **Secretary of State** INDIAN RIVER APARTMENTS, INC. 03-02-2001 90052 028 ***150.00 Principal Place of Business Mailing Address C/O SENTINEL REAL ESTATE CORPORATION C/O SENTINEL REAL ESTATE CORPORATION 666 FIFTH AVENUE 666 FIFTH AVENUE AVTA NEW YORK NY 10103 NEW YORK NY 10103 2. Principal Place of Business 1251 3. Mailing Address 1251 Avenue of the Americas Avenue of the Americas Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 36th Floor 36th Floor City & State Applied For City & State 4. FEI Number 59-3334243 New York, NY New York, Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 10020 USA 10020 USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zin Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. x Change □ Delete TITLE TITLE NAME STREICKER, JOHN H NAME STREET ADDRESS 1251 Avenue of the Americas STREET ADDRESS 666 FIFTH AVENUE CITY-ST-ZIP CITY-ST-7IP New York, NY 10020 **NEW YORK NY** Delete X Change TITLE TITLE NAME NAME LONGO, ELIZABETH STREET ADDRESS STREET ADDRESS 666 FIFTH AVENUE 1251 Avenue of the Americas CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY** New York, NY 10020 TITLE ☐ Delete TITLE NAME KENNY, MICHAEL J NAME Watters, Connell J. STREET ADDRESS STREET ADDRESS 1251 Avenue of the Americas 666 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10103 New York, NY 10020 TITLE ☐ Delete TITLE NAME NAME BRESLIN, ANITA STREET ADDRESS STREET ADDRESS 1251 Avenue of the Americas 666 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY New York, NY 10020 Delete Change TITLE TITLE ☐ Addition CASSIDY, MILLIE C. NAME STREET ADDRESS STREET ADDRESS 666 FIFTH AVENUE 1251 Avenue of the Americas CITY-ST-ZIP CITY-ST-ZIP New York, NY 10020 NEW_YORK_NY Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME WEINER, DAVID STREET ADDRESS STREET ADDRESS 666 FIFTH AVE 1251 Avenue of the Americas CITY-ST-7IP CITY-ST-ZIP NEW YORK NY New York, NY 10020

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:

inhature and types or printed name of signing officer or director
Connell J. Watters, Secretary

1/29/01

212-408-5000

Daytime Phone #