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

032371

PROFIT CORPORATION ANNUAL REPORT **1999**	FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State
05-04-1999 90147 045 ***150.00

DOCUMENT # P96000071422

1. Corporation Name
CORNERSTONE PROPERTIES, INC.

Principal Place of Business	Mailing Address
2090 PALM BEACH LAKES BLVD. STE 800 WEST PALM BEACH FL 33409	2090 PALM BEACH LAKES BLVD. STE 800 WEST PALM BEACH FL 33409

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
09/01/1996

2. Principal Place of Business	2a. Mailing Address
21	26
22 580 Village Blvd. Suite 160	Suite 160
23 West Palm Beach, FL 33409	28 West Palm Beach, FL 33409

Zip	Country	Zip	Country
24	25	29	30

4. FEI Number **65-0840631** | Applied For / Not Applicable

5. Certifcate 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CHILLINGWORTH, CHARLES C ESQ. 2090 PALM BEACH LAKES BLVD. STE 800 WEST PALM BEACH FL 33409	81 Name 82 St Jeanne Odom Conway, Esq. 83 580 Village Blvd., Suite 160 West Palm Beach, FL 33409 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: _Jean O. Conway_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 4/29/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME CHILLINGWORTH, CHARLES C STREET ADDRESS 2090 PALM BEACH LAKES BLVD. STE 800 CITY-ST-ZIP WEST PALM BEACH FL 33409	☐ DELETE	1.1 TITLE 1.2 NAME Charles C. Chillingworth 1.3 STREET ADDRES 257 Granada Road 1.4 CITY-ST-ZIP West Palm Beach, FL 33409	☒ Change ☐ Addition
TITLE D NAME RAY, BRADLEY T STREET ADDRESS 2090 PALM BEACH LAKES BLVD. STE 800 CITY-ST-ZIP WEST PALM BEACH FL 33409	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 9105 Catalina Isle Dr. 2.4 CITY-ST-ZIP Lake Worth, FL 33467	☒ Change ☐ Addition
TITLE S NAME FEKETE, HELEN STREET ADDRESS 2090 PALM BEACH LAKES BLVD. STE 800 CITY-ST-ZIP WEST PALM BEACH FL 33409	☐ DELETE	3.1 TITLE 3.2 NAME 580 Village Blvd. 3.3 STREET ADDRESS Suite 160 3.4 CITY-ST-ZIP West Palm Beach, FL 33409	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: _____ Secretary 4/27/99 561-640-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #