2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2000 8:00 am
Secretary of State
05-04-2000 90025 048 ***158.75

DOCUMENT # P99000006635

1. Entity Name

880 MANDALAY AVENUE INC.

Principal Place of Business	Mailing Address
C/O CLARION PARTNERS L.L.C. 335 MADISON AVENUE NEW YORK NY 10017	C/O CLARION PARTNERS L.L.C. 335 MADISON AVENUE NEW YORK NY 10017-4605

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 13-40468-08 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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 _____ DATE

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

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	D/P WEISZ, JOHN A 335 MADISON AVENUE NEW YORK NY 10017	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/S/T Peter H. Zappulla 335 Madison Avenue New York, NY 10017 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V FURNARY, STEPHEN J 335 MADISON AVENUE NEW YORK NY 10017	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Douglas J. Bowen 335 Madison Avenue New York, NY 10017 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V GROSSMAN, CHARLES 335 MADISON AVENUE NEW YORK NY 10017	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT/AS Sandford Jacolow 335 Madison Avenue New York, NY 10017 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V SULLIVAN, FRANK J JR. 335 MADISON AVENUE NEW YORK NY 10017	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Edward M. Rotter 335 Madison Avenue New York, NY 10017 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT ROTTER, EDWARD M 335 MADISON AVENUE NEW YORK NY 10017	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P John A. Weisz 335 Madison Avenue New York, NY 10017 — ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS QUENTEL, ALBERT D 1221 BRICKELL AVENUE MIAMI FL 33131	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V Stephen J. Furnary Charles Grossman Frank J. Sullivan, Jr. } same address as above — ☒ Change ☐ 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: Douglas J. Bowen REQUIRED 4-20-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/99)