2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900029629 Aug 17, 2000 8:00 am Secretary of State 1. Entity Name PROSPECT PARK REALTY CORP. 08-17-2000 90100 025 ***550.00 Principal Place of Business Mailing Address C/O SENTINEL REAL ESTATE CORPORATION C/O SENTINEL REAL ESTATE CORPORATION 666 5TH AVE., 26TH FLOOR 666 5TH AVE., 26TH FLOOR NEW YORK NY 10103 NEW YORK NY 10103 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 914682 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filling requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. D ☐ Addition TITLE □ Delete TITL F Change STREICKER, JOHN H NAME NAME STREET ADDRESS 666 5TH AVE. STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10103** CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE KURTZ, CHRISTINE C NAME NAME STREET ADDRESS STREET ADDRESS 666 5TH AVE. CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10103** T/D ☐ Change Addition TITLE ☐ Delete TITLE LONGO, ELIZABETH NAME NAME STREET ADDRESS STREET ADDRESS 666 5TH AVE. CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10103** ☐ Delete TITLE ☐ Change ☐ Addition TITLE Cawley, Martin J. 1666 Fifth Ave NAME NAME STREET ADDRESS STREET ADDRESS new York, ny 10103 CITY-ST-ZIP CITY-ST-ZIP 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 of 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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

SIGNATURE:

malone, James Wob fifth Ave

Wallers, Connell J.

666 Fifth Are

NewYork. NY 10103

TITLE

NAME

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

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Change

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