

2016 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M12000003930

Entity Name: BRE THRONE EAST PORT PLAZA LLC

Current Principal Place of Business:

450 LEXINGTON AVENUE
13TH FLOOR
NEW YORK, NY 10017

Current Mailing Address:

450 LEXINGTON AVENUE
13TH FLOOR
NEW YORK, NY 10017 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title: MANAGER
Name: SIEGEL, STEVEN
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: PRESIDENT/CEO
Name: TAYLOR, JAMES M.
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: EVP/CFO/TREASURER
Name: AMAN, ANGELA
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: EVP/GENERAL COUNSEL/SECRETARY
Name: SIEGEL, STEVEN
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: EVP/CIO
Name: HORGAN, MARK
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: EVP
Name: MOSS, MICHAEL
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: EVP
Name: SINGH, CAROLYN
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title: EVP
Name: FINNEGAN, BRIAN
Address: 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN SIEGEL

SECRETARY

11/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title EVP
Name LITZLER, THOMAS
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title EVP
Name VENDER, DAVID
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name AXELRAD, MICHAEL
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name GERSTENHABER, DAVID
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name SLATER, STACY
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name MOORE, KRISTEN
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name CREEKMORE, TONYA
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name PIPPIS, JAMES
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title ASST. SECRETARY
Name BENNISON, PATRICK
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title EVP
Name RODENSTEIN, BARRY
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title EVP
Name BERGER, MATTHEW
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name BUCHAKJIAN, HAIG
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name KAUFMAN, STEVEN
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name STEIN, HELANE
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name GUHEEN, RYAN
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name WHITE, JASON
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

Title SVP
Name JAMBOIS, ROBERT
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017