

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001460

FILED
Apr 26, 2017
Secretary of State
CC9030452626

Entity Name: ERT 163RD STREET MALL, 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: 33-0831382

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 AUTHORIZED MEMBER
Name CENTRO NP ERT LLC
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 TREASURER, EVP, CFO
Name AMAN, ANGELA
Address 450 LEXINGTON AVENUE
13TH FLOOR
City-State-Zip: NEW YORK NY 10017

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

Title EVP
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

Continues on page 2

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

AUTHORIZED PERSON

04/26/2017

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

Title SR. VP
Name BUCHAKJIAN, HAIG
Address 450 LEXINGTON AVENUE
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City-State-Zip: NEW YORK NY 10017

Title SR. VP
Name KAUFMAN, STEVEN
Address 450 LEXINGTON AVENUE
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Title SR. VP
Name STEIN, HELANE
Address 450 LEXINGTON AVENUE
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Title SR. VP
Name GUHEEN, RYAN
Address 450 LEXINGTON AVENUE
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Title SR. VP
Name WHITE, JASON
Address 450 LEXINGTON AVENUE
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Title SR. VP
Name BENNISON, PATRICK
Address 450 LEXINGTON AVENUE
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Title EVP
Name RODENSTEIN, BARRY
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Title EVP
Name BERGER, MATTHEW
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Title SR. VP
Name GERSTENHABER, DAVID
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Name SLATER, STACY
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Title EVP
Name MOORE, KRISTEN
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Title SR. VP
Name CREEKMORE, TONYA
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Title SR. VP
Name PIPPIS, JAMES
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