. FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **018091** **(9)**

1. Corporation Name

BESSEMER TRUST COMPANY OF FLORIDA

Principal Place of Business	Mailing Address
222 ROYAL PALM WAY PALM BEACH FL 33480	222 ROYAL PALM WAY PALM BEACH FL 33480

3. Date Incorporated or Qualified: 05/10/1929
3a. Date of Last Report: 02/03/1995

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 59-6067333 ☐ Applied For ☐ Not Applicable

5. Certificate 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 has liability for intangible tax under s 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~HELSOM, FRANK E.~~
~~222 ROYAL PALM WAY~~
~~PALM BEACH FL 33480~~

10. Name and Address of New Registered Agent

81 Name: William A. Matthews
82 Street Address (P.O. Box Number is Not Acceptable): 222 Royal Palm Way
83:
84 City: Palm Beach FL 85 Zip Code: 33480

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HELSOM, FRANK E.		1.2 NAME	
STREET ADDRESS	222 ROYAL PALM WAY		1.3 STREET ADDRESS	400001836014
CITY-ST-ZIP	PALM BEACH FL		1.4 CITY-ST-ZIP	-05/23/96--01010--012
TITLE	PD	☐ DELETE	2.1 TITLE	***200.00 ☐ Change ☐ Addition
NAME	WHITMORE, JOHN R		2.2 NAME	
STREET ADDRESS	630 5TH AVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 0		2.4 CITY-ST-ZIP	
TITLE	V	☒ DELETE	3.1 TITLE	V ☐ Change ☒ Addition
NAME	HASTINGS, CHARLES W.		3.2 NAME	Donald J. Herrema
STREET ADDRESS	630 5TH AVE		3.3 STREET ADDRESS	630 5th Avenue
CITY-ST-ZIP	NEW YORK, NY 0		3.4 CITY-ST-ZIP	New York, NY
TITLE	V	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ELLIOTT, ROBERT C.		4.2 NAME	
STREET ADDRESS	630 5TH AVENUE		4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY		4.4 CITY-ST-ZIP	
TITLE	V	☒ DELETE	5.1 TITLE	V ☐ Change ☒ Addition
NAME	WAIDE, PATRICK, J. JR.		5.2 NAME	John G. MacDonald
STREET ADDRESS	630 5TH AVE		5.3 STREET ADDRESS	630 5th Ave
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-ST-ZIP	New York, NY 10111
TITLE	V	☒ DELETE	6.1 TITLE	V ☐ Change ☒ Addition
NAME	SCHWIND, FRED J.		6.2 NAME	William A. Matthews
STREET ADDRESS	222 ROYAL PALM WAY		6.3 STREET ADDRESS	222 Royal Palm Way
CITY-ST-ZIP	PALM BEACH FL		6.4 CITY-ST-ZIP	Palm Beach, FL 33480

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: William A. Matthews William A. Matthews 4/18/96 407-655-4030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #