100009

Annual Report
Filed 1-21-82

2 pgs.
**FLORIDA DEPARTMENT OF STATE**

**DIVISION OF CORPORATIONS**

**ANNUAL REPORT**

**1982**

**CORPORATION**

**100009**

**UNited States Corporation Co**

**70 Pine Street**

**New York N Y**

**10270**

**Name and Address of Corporation Principal Office**

**Name and Address of Principal Office in Florida**

**Name and Address of Corporation's California Office**

**Date Incorporated or Qualified**

**To Do Business in Florida**

**07/25/1925**

**Federal Employer Identification Number (FEIN)**

**13-6149455**

**Date of Last Report**

**04/23/1981**

**Names of Officers and Directors**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Street Address of Each Officer and Director</th>
<th>City and State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kiernan, Garvin</td>
<td>P/D</td>
<td>70 Pine St</td>
<td>New York, NY</td>
</tr>
<tr>
<td>De Mattina, John</td>
<td>T/A</td>
<td>70 Pine St</td>
<td>New York, NY</td>
</tr>
<tr>
<td>McNealy, Catherine</td>
<td>S</td>
<td>70 Pine St</td>
<td>New York, NY</td>
</tr>
<tr>
<td>Daniel S. Nutter</td>
<td>V/D</td>
<td>70 PINE ST</td>
<td>New York, N.Y.</td>
</tr>
<tr>
<td>Hattie F. Murphy</td>
<td>T</td>
<td>70 PINE ST</td>
<td>New York, N.Y.</td>
</tr>
</tbody>
</table>

**Registered Agent Information**

<table>
<thead>
<tr>
<th>Name</th>
<th>Street Address (Do NOT Use P.O. Box Number)</th>
<th>City, State and Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moore, Edgar H.</td>
<td>300 East Park Ave, 400 Barnett Bank Bldg.</td>
<td>Tallahassee, FL 32301</td>
</tr>
</tbody>
</table>

**Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing**

**Such change was authorized by resolution duly adopted by its board of directors on**

**SIGNATURE**

(Registered Agent Accepting Appointment)

**$3.00 additional fee required for Registered Agent changes.**

**See signature restrictions under instructions on reverse side of this form.**

**I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 FS.**

**I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.**

**Signature**

Hattie F. Murphy

**Title**

Treasurer

**Telephone Number**

(904) 355-0460