

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 835070

1. Entity Name

THE BROADSTONE GROUP, INC.

Principal Place of Business

888 SEVENTH AVE., SUITE 3400
NEW YORK NY 10106

Mailing Address

888 SEVENTH AVE., SUITE 3400
NEW YORK NY 10106-0199
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BERGER & SHAPIRO
100 N.E. 3RD AVE., SUITE #400
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WALLACE, PAUL F 888 SEVENTH AVE., STE 3400 NEW YORK NY 10106-1099	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SPOTO, ANTONINA L 888 7TH AVENUE, SUITE 3400 NEW YORK NY 10106-0199	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS COLLINS, KEVIN 888 SEVENTH AVENUE SUITE 3400 NEW YORK NY 10106-0199	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOPATER, LAWRENCE 888 SEVENTH AVE, STE 3400 NEW YORK NY 10106-0199	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BORY, JUDITH 888 SEVENTH AVE., SUITE 3400 NEW YORK NY 10106-0199	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS 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 or 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.

SIGNATURE:

Judith Bory

Judith Bory

1/9/01

212-333-2107

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90017 033 ***150.00



DO NOT WRITE IN THIS SPACE

0442555

CR2E034 (10/00)