FILED

2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Feb 21, 2002 8:00 am Secretary of State **DOCUMENT #** 835070 1. Entity Name THE BROADSTONE GROUP, INC. 02-21-2002 90136 016 ***150 00 Principal Place of Business Mailing Address 888 SEVENTH AVE., SUITE 3400 888 SEVENTH AVE., SUITE 3400 **NEW YORK NY 10106** NEW YORK NY 10106-0199 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 13-2813222 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BERGER & SHAPIRO** Street Address (P.O. Box Number is Not Acceptable) 100 N.E. 3RD AVE., SUITE #400 FT. LAUDERDALE FL 33301 Zin Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (Sêe criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP: TITLE ☐ Delete TITLE Change ☐ Addition WALLACE, PAUL F NAME STREET ADDRESS 888 SEVENTH AVE., STE 3400 STREET ADDRESS CITY-ST-ZIP NEW_YORK NY_10106-1099 : CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME LOPATER, LAWRENCE NAME STREET ADDRESS 888 SEVENTH AVE, STE 3400 STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10106-0199 CITY-ST-ZIP TITLE . Delete Change Addition NAME BORY, JUDITH NAME STREET ADDRESS 888 SEVENTH AVE., SUITE 3400 STREET ADDRESS CITY-ST-7IP **NEW YORK NY 10106-0199** CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filling 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 Statules; and that my name appears in Block 11 or Block 12 in