

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000004106

1. Entity Name

DA CAPO AL FINE, LTD., CORP.

Principal Place of Business

Mailing Address

P O BOX 222
COLD SPRING NY 10516
US

P O BOX 222
COLD SPRING NY 10516
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 22-2607017

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SEITZ, HOWARD G ESQ.
11392 TURTLE BEACH RD.
LOST TREE VILLAGE
NORTH PALM BEACH FL 33408

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDC
NAME CABOT, FRANCIS H
STREET ADDRESS 2 WEST STREET #1N
CITY-ST-ZIP COLD SPRING NY 10516 ☐ Delete

TITLE PDC
NAME CABOT, FRANCIS H.
STREET ADDRESS 81 STONECROP LANE
CITY-ST-ZIP COLD SPRING, NY 10516 ☒ Change ☐ Addition

TITLE T
NAME GORDON, MARGARET
STREET ADDRESS 2 WEST STREET #1N
CITY-ST-ZIP COLD SPRING NY 10516 ☐ Delete

TITLE T
NAME GORDON, MARGARET
STREET ADDRESS 81 STONECROP LANE
CITY-ST-ZIP COLD SPRING, NY 10516 ☒ Change ☐ Addition

TITLE VSD
NAME SEITZ, HOWARD G
STREET ADDRESS 230 PARK AVE., #1567
CITY-ST-ZIP NEW YORK NY 10017 ☐ Delete

TITLE VSD
NAME SEITZ, HOWARD G.
STREET ADDRESS 230 PARK AVE., SUITE 1130
CITY-ST-ZIP NEW YORK, NY 10169 ☒ Change ☐ Addition

TITLE D
NAME CABOT, F C
STREET ADDRESS 7097 SANBORN ROAD
CITY-ST-ZIP COUPON NH 03301 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

Date

Daytime Phone #

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90064 031 ***150.00

817420



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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March 14, 2001

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

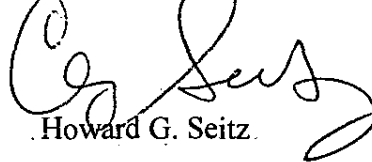
Re: DA CAPO AL FINE, LTD., CORP.

Dear Sirs:

I enclose herewith 2001 Uniform Business Report for Da Capo al Fine, Ltd., Corp.
together with a check payable to your order in the amount of \$150.

If you have any questions, please do not hesitate to call.

Sincerely yours,


Howard G. Seitz

HGS:mat