

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2000 8:00 am
Secretary of State

04-28-2000 90421 007 ***150.00

DOCUMENT # F96000005135
1. Entity Name
 Waterford Realty Holding Company, Inc.

Principal Place of Business
 23 WALL ST.
 NEW YORK NY 10260-0023

Mailing Address
 23 WALL ST.
 NEW YORK NY 10260-1000

00040700



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip **Country**

4. FEI Number
 13-3901465

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

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, 2000 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 VASD	NAME PFEIFFER, ANNE S	<input type="checkbox"/> Delete
STREET ADDRESS 23 WALL STREET	CITY-ST-ZIP NEW YORK NY 10260-0023	
TITLE VTD	NAME ASTARITA, MICHAEL G	<input type="checkbox"/> Delete
STREET ADDRESS 23 WALL STREET	CITY-ST-ZIP NEW YORK NY 10260-0023	
TITLE VASD	NAME GARDINER, DOUGLAS R	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 23 WALL STREET	CITY-ST-ZIP NEW YORK NY 10260-0023	
TITLE VASD	NAME OCHS, GEORGE L	<input type="checkbox"/> Delete
STREET ADDRESS 23 WALL STREET	CITY-ST-ZIP NEW YORK NY 10260-0023	
TITLE DP	NAME GIFFORD, BENJAMIN G	<input type="checkbox"/> Delete
STREET ADDRESS 23 WALL STREET	CITY-ST-ZIP NEW YORK NY 10260-0023	
TITLE VAS	NAME ALFRED, DORT	<input type="checkbox"/> Delete
STREET ADDRESS 23 WALL STREET	CITY-ST-ZIP NEW YORK NY 10260-0023	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	

VASD
 Giliberto Jr., S. Michael
 23 Wall street
 New York, NY 10260-0023

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 *Anne M. Manewo* **Signature and typed or printed name of signing officer or director**

Date 4/18/00 **Daytime Phone #** (212) 837-9396

COPY BY 10/00