

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P08884** (9)

1. Corporation Name
BLUE TEE CORP.



Principal Place of Business: **250 PARK AVENUE S., 2ND FLOOR NEW YORK NY 10003**
Mailing Address: **250 PARK AVENUE S., 2ND FLOOR NEW YORK NY 10003**

3. Date Incorporated or Qualified: **01/28/1986**
3a. Date of Last Report: **04/28/1995**
4. FEI Number: **13-2925766**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
Suite, Apt. #, etc.: 22
27
City & State: 23
28
Zip: 24
Country: 25
29
30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, type or printed name of registered agent and title (applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPD	<input type="checkbox"/> DELETE
NAME	PAUL, L.M.	
STREET ADDRESS	1650 AVALON	
CITY-ST-ZIP	BEAUMONT TX	
TITLE	AC	<input type="checkbox"/> DELETE
NAME	D'AURIA, JERRY D.	
STREET ADDRESS	16 ROUTE 34	
CITY-ST-ZIP	MATAWAN NJ	
TITLE	DVP	<input type="checkbox"/> DELETE
NAME	POLLAN, BERT	
STREET ADDRESS	1000 N LKE SHORE DR 2205	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SOUTHIEMER, ROBERT	
STREET ADDRESS	56 BEATRICE CIRCLE	
CITY-ST-ZIP	BELMONT MA	
TITLE	CEO	<input type="checkbox"/> DELETE
NAME	SECRIST, RICHARD A.	
STREET ADDRESS	36 LARNED ROAD	
CITY-ST-ZIP	SUMMIT NJ	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	KELLY, WILLIAM M.	
STREET ADDRESS	WENDOVER ROAD	
CITY-ST-ZIP	RYE NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS	810 ROUTE 34	
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jerry D'Auria* 1/17/96 (212) 578-0889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

CR2E034 (12/95)

THE OFFICERS & DIRECTORS OF BLUE TEE CORP.

AS OF DECEMBER 31, 1986

TITLE	OFFICERS/DIRECTORS NAME:	SOCIAL SECURITY #
CHAIRMAN OF THE BOARD/PRESIDENT CHIEF EXECUTIVE OFFICER/DIRECTOR	MR. RICHARD A. SECREST 104 WOODLAND AVENUE SUMMIT, N.J. 07901	208-68-8733
EXECUTIVE VICE PRESIDENT/DIRECTOR	MR. WILLIAM M. KELLY 349 STERLING ROAD HARRISON, NEW YORK 10528	073-38-5422
VICE PRESIDENT/DIRECTOR	MR. BERT POLLAN 1000 NORTH LAKE SHORE DRIVE, #2205 CHICAGO, ILLINOIS 60611	342-22-2378
VICE PRESIDENT/TREASURER/SECRETARY	MR. GLENN A. SMITH 1370 JOHNSON DRIVE WATCHUNG, N. J. 07060	171-36-8671
VICE PRESIDENT/CONTROLLER ASSISITANT SECRETARY	MR. DAVID P. ALLDIAN 94 CEDAR ISLAND DRIVE BRICK, N. J. 08723	149-48-3430
VICE PRESIDENT	MR. MICHAEL W. CALVERT 2215 EAST GRAND AVENUE ENGLEWOOD, COLORADO 80110	258-66-4387
VICE PRESIDENT	MR. JEFFREY P. SMITH 5910 QUAIL LANE ENID, OKLAHOMA 73703	450-74-9805
DIRECTOR	MR. L. M. PAUL RT. 5, BOX 182 PINE ISLAND ROAD BEAUMONT, TEXAS 77713	436-40-5395
ASST. CONTROLLER/ASST. SECRETARY/ ASSISITANT TREASURER	MR. JERRY D'AURIA 810 STATE HIGHWAY 34 MATAWAN, N.J. 07747	099-44-7106
DIRECTOR	MR. ROBERT M. SONTHEIMER 56 BEATRICE CIRCLE BELMONT, MA. 02178	065-32-2134
DIRECTOR	MR. CHRISTOPHER GLYNN CLIFFORDSHIRE HOUSE SELSLEY, NR. STROUD, GLOUCESTERSHIRE, GL5 5LB, ENGLAND	NON U.S. CITIZEN
DIRECTOR	MR. VERN G. SEADON 11710 100TH AVENUE, APT #403 EDMONTON, ALBERTA, T5K 2G3, CANADA	NON U.S. CITIZEN