

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002050

Entity Name: TNTP (DELAWARE), INC.

Current Principal Place of Business:

186 JORALEMON STREET
SUITE 300
BROOKLYN, NY 11201

FILED
Jan 18, 2018
Secretary of State
CC6766144110

Current Mailing Address:

186 JORALEMON STREET
SUITE 300
BROOKLYN, NY 11201

FEI Number: 13-3850158

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BELCHER, KAROLYN
Address 186 JORALEMON STREET, SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name GLICKMAN, MATT
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title CEO, DIRECTOR
Name WEISBERG, DANIEL
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title EXECUTIVE VICE PRESIDENT
Name AVILA, LAYLA
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name TERRELL, DIANE
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name HAYES, MICHAEL
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name WALCOTT, DENNIS
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name AVILA, LUIS
Address 186 JORALEMON STREET
 SUITE 300
City-State-Zip: BROOKLYN NY 11201

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FLORENCE CHAPIN

SECRETARY

01/18/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PASTOREK, PAUL
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name HAYCOCK, KATI
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name TUHY, JENNIFER
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title EXECUTIVE VICE PRESIDENT
Name HARRIS, ANNE
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title VP
Name KEANE, DIANE
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name MCGUIRE, C. KENT DR.
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name BIERLY, CHRIS
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title DIRECTOR
Name HOWE, DAVID
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201

Title SECRETARY, GENERAL COUNSEL
Name CHAPIN, FLORENCE
Address 186 JORALEMON STREET
SUITE 300
City-State-Zip: BROOKLYN NY 11201