

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**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

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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