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FILED

May 18 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 116713 (9)  
1. Corporation Name  
HUNTER LYON INCORPORATED



Principal Place of Business  
70 PINE ST  
NEW YORK NY 10270  
US

Mailing Address  
70 PINE STREET  
30TH FLOOR  
NEW YORK NY 10270  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/16/1928

4. FEI Number

59-0339540

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME MATTHEWS, EDWARD E.  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE T  
NAME DOOLEY, WILLIAM  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE VD  
NAME FITZPATRICK, KEVIN  
STREET ADDRESS 1 CHASE MANHATTAN PLAZA  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE D  
NAME LANDMAN, SCOTT  
STREET ADDRESS ONE CHASE MANHATTAN PLZ.  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE S  
NAME TUCK, ELIZABETH M.  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE VC  
NAME HAMMER, JOEL H.  
STREET ADDRESS ONE CHASE MANHATTAN PLAZA  
CITY-ST-ZIP NEW YORK NY ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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:

*Eligible to file*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-98

Date

(202) 770-7000

Daytime Phone # 0519173

CR2E034 (10/97)