

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 225997

(6)

95 FEB -2 PM 4:20

1. Corporation Name

NORTH CHANNEL CORPORATION

Principal Place of Business

17 E. 47TH STREET
NEW YORK NY 10017

Mailing Address

17 E. 47TH STREET
NEW YORK NY 10017

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/16/1959

38. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

4. FBI Number

59-0980209

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

9. Name and Address of Current Registered Agent

STEWART, CARL M
C/O ULMER, MURCHISON, ASHBY & TAYLOR
200 W. FORSYTH ST., STE. 1600
JACKSONVILLE FL 32202

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SLOANE, HOWARD G.
STREET ADDRESS 8 OAK LANE
CITY - ST - ZIP LARCHMONT NY

TITLE VTD
NAME SMADBECK, ARTHUR J.
STREET ADDRESS R.F.D. 65-A BOX 3
CITY - ST - ZIP EDGARTOWN MA

TITLE AS
NAME GUCE, RENATO
STREET ADDRESS 104-57 112TH ST
CITY - ST - ZIP RICHMOND HILL NY

TITLE VD
NAME SMADBECK, PAUL
STREET ADDRESS TITICUS ROAD ROUTE 116
CITY - ST - ZIP NORTH SALEM NY

TITLE VD
NAME HART, WILLIAM D., JR.
STREET ADDRESS DEER PARK ROAD
CITY - ST - ZIP NEW CANAAN CT

TITLE SAT
NAME ROSENBAUM, HOWARD
STREET ADDRESS 328 E. 52ND ST
CITY - ST - ZIP NEW YORK NY

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included 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 unchanged, or on an attachment with an address.

SIGNATURE:

HOWARD ROSENBAUM
TITLED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD
ROSENBAUM

Date

Telephone #

1/26/95

212 371-7773

NORTH CHANNEL CORPORATION

Name of
Officers & Directors

Title

Address

City & State

Virginia Sloane

D

8 Oak Lane, Larchmont, NY
10538