DOCU		# 344201	•			•	* _N .		012	
NEPCC	(FLORID	A), INC.					FILE	ED		
Principal Pla	ce of Busines	<u> </u>	Mailing Address				01 JAN 29	AM IO: :	37	
5700 WILSHIRE BOULEVARD SUITE 575 LOS ANGELES CA 90036-3659			5700 WILSHIRE BOULEVARD SUITE 575 LOS ANGELES CA 90038-3659				SECRETARY OF STATE TALLAHASSEE FLORIDA			
2. Principal Place of Business 4655 Salisbury Road			3. Mailing Address 4655 Salisbury Road							
Suite, Apt. #, etc. Suite 399			Suite, Apt. #, etc. Suite 399			13	THE DAY OF THE PARTY	AS SPACE	2777	
Suite 399 City & State			City & State			4.	FEI Number 50 4404000		Applied For	
Jackso	nville,	FL	Jacksonville,	FL			59-1481399		Not Applicable	
Zip 32	256	Country	zip 32256	Coun	ntry	5.	Certificate of Status Desired	\$8.75 Fee Rec	Additional quired	
	6. Name	and Address of Current Re	gistered Agent		Name	7.	Name and Address of New Register	ed Agent		
C I		TION SYSTEM					ration Service Compan	ay		
	OS. PINE I				Street A	ddress (P.O.	Box Number is Not Acceptable)			
PLANTATION FL 33324					1201 Hays Street					
					City		`	FL Zip (Code 32301	
O The shows									32301	
8. The above	riamed entity	submits this statement for the	ie purpose of changing its re	egistere	ea onice o	r registereo a	agent, or both, in the State of Florida.		- /	
SIGNATURE	Ma	Me	Merr	y1 V	Wiener	, Asst.	. V.P. ///	16	² /	
SIGNATION	Signature Ayped	or printed name of registered agent and	title if applicable. (NOTE:	Registere	d Agent signat	ure required when	reinstating) DA	VIE.	/	
Tax filing	requirement a	ble to satisfy its Intangible nd elects to do so.	FILE NOW!!! After SEPTEMBER 13,		• • • •		Election Campaign Financing Trust Fund Contribution.	_ ~	5.00 May Be	
∠(See crite	ria on back)	\overline{\over	Make Check Payable	to De	epartmen	t of State	Trust Faire Contribution.	A(JOBO TO FEES	
11.	1	OFFICERS AND DI		12,		 	ADDITIONS/CHANGES TO OFFICERS			
TITLE	V	IANEO I	. 🔀 Delete	NAMI		P/D	7	☐ Char	nge 🔯 Addition	
NAME STREET ADDRESS		James J. Shire BLVD STE 575			ET ADDRESS	1	J. Briskman st 52nd Street			
CITY-ST-ZIP		GELES CA 90036		CITY-	-ST-ZIP	ı	ork, NY 10019			
TITLE	D		Delete	TITLE		EV/D		Chan	nge 🔀 Addition	
NAME	SUCHIL,		4.	NAM		Michae	el D. Fricklas			
STREET ADDRESS CITY-ST-ZIP		SHIRE BLVD STE 575			et adoress -st-zip		Broadway			
TITLE	SVCF	ELES CA 90036	XI Delete	TITLE		ī	ork, NY 10036	Chan	nge 🔯 Addition	
NAME. ~ ·		NUM, ROSS.G.	EXT Delete	NAME		EV/D	a C Down ald a	Onlan	ige [2] reduction	
STREET ADDRESS	•	SHIRE BLVD STE 575		STRE	ET ADDRESS		.c G.∞Reyno1ds Broadway	-		
CITY-ST-ZIP	T———	SELES_CA 90036		CITY-	-ST-ZIP	New Yo	ork, NY 10036			
TITLE -	AS	T	X Delete	TITLE		sv		☐ Chan	ige 🔀 Addition	
STREET ADDRESS	1	ith, greer C. Shire blvd ste 575 (NAME STREE	e et address	1	m A. Roskin			
CITY-ST-ZIP	1	ELES CA 90036			-ST-ZIP	1515 B New Yo	roadway ork, NY 10036			
TITLE	, VAS	······································	☐ Delete	TITLE		V/S	·	X Chan	nge 🔲 Addition	
NAME	ROSS, JO			NAME		•	20000365	427	2,,-6	
STREET ADDRESS CITY-ST-ZIP		ISBURY RD #399			et address -st-zip		-02/06/01- ****750.0		011 *750.00	
	P.D	WILLE FL 32256	57 n_(-	1		77.10				
TITLE NAMÉ		NN, PETER H	🔀 Delete	. TITLE NAME			roller F. Davis	☐ Chan	ige 🔯 Addition	
STREET ADDRESS		SHIRE BLVD STE 575			- Et adoress		nwix Street	K	E	
CITY-ST-ZIP		FLES CA 90036		CITY-	-ST-ZIP		urch PA 15222	• •	. == →	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ross, V.P. NAME OF SIGNING OFFICER OR DIRECTOR

1/25/01

904-281-4488

Daytime Phone #

20F2

Attachment to 2000 Uniform Business Report for Nepco (Florida), Inc. Document #344201

12. Additions/Changes to Officers and Directors							
Title	V/AS	× Addition					
Name	Michelena Hallie						
Street Address	1515 Broadway	•					
City, State, Zip	New York, NY 10036						
Title	V/AS	× Addition					
Name	Mark C. Morril	- .					
Street Address	1515 Broadway						
City, State, Zip	New York, NY-10036						
Title	V	× Addition					
Name	Jack Carpenter						
Street Address	1515 Broadway	•					
City, State, Zip	New York, NY 10036						
Title	V	× Addition					
Name	Robert G. Freedline						
Street Address	1515 Broadway						
City, State, Zip	New York, NY 10036						
Title	V	× Addition					
Name	Susan C. Gordon						
Street Address	1515 Broadway						
City, State, Zip	New York, NY 10036	·					
Title	V	× Addition					
Name	Victor S. Rappa						
Street Address	1515 Broadway						
City, State, Zip	New York, NY 10036						
Title	AS	★ Addition					
Name	Laura Franco						
Street Address	1515 Broadway						
City, State, Zip	New York, NY 10036	·					
Title	AS	× Addition					
Name	Donna A. Hoffman						
Street Address	4655 Salisbury Rd., Ste. 399	•					
City, State, Zip	Jacksonville, FL 32256						
Title	AS	× Addition					
Name	Katherine B. Rosenberg						
Street Address	1515 Broadway						
City, State, Zip	New York, NY 10036						
Title	AS	× Addition					
Name	Ilene W. Stack						
Street Address	1515 Broadway						
City, State, Zip	New York, NY 10036						