## 2009 UNIFORM BUSINESS REPORT (UBR)

PAGE 10+2

DOCU	MENT # 598619		,	ĺ						
1. ENtity Varne				FILED						
CHARTER CARIBBEAN COMPANY					() )					
			<del> </del>		01	MAR -8 PH 1	: 25			
Principal Place of Business Mailing Address				1						
5700 WILSHIRE BOULEVARD 5700 WILSHIRE BOULEVAR SUITE 575 SUITE 575		1		TĂLL	RETARY OF ST. AHASSEE FLO	RIDA RIDA				
		LOS ANGELES CA 90036-36	59							
					)		JI BIBN BIBN BIBN B			
2. Principal Place of Business		3. Mailing Address 4655 Salisbury Road								
4655 Salisbury Road Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN TH	IIS SPACE			
Suite 399		Suite 399			- Ann					
City & State Jackson	e ville, FL	City & State Jacksonville, F	'L	$-\lambda$	A: Italy Amber	59-1882007	<b></b>	plied For ot Applicable		
Zip	Country	Zip	Country	(T)	er ficate of S	Status Desired	\$8.75 Add	titional		
323	2.56 6. Name and Address of Current F	32256	10		7	Idress of New Register	Fee Require	d		
	o. Name and Address of Current	logistered Agent	Nava	Corno		· · · · · · · · · · · · · · · · · · ·				
	C T CORPORATION SYSTEM % C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  Tallahassee  7. Name and Address of New Registered Agent Corporation Service Company Street Address (P.O. Box Number is Not Acceptable)  1201 Hays Street  City Tallahassee  FL Zip Code 32301									
	C T CORPORATION SYSTEM	ATEN								
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				1201 Hays Street						
	A	Illen	City	Talla	hassee	F	Zip Code	<sup>e</sup> 32301		
8. The above	named entity submits this statemen &			r registere	d agent, or both, in	n the State of Florida.	, /			
Merryl Wiener, Asst. V.P.										
SIGNATURE	Signature, typed or printer hame of registered agent ar		Registered Agent signat			l. BAI	0/0/	<del></del>		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00										
Tax filing regulrement and elects to do so.  (See criteria on back)  After SEPTEMBER 13, 2000 Min. will be \$750.00  After SEPTEMBER 13, 2000 Min. will be \$750.00  Trust Fund Contribution.  Added to Fees										
11.	OFFICERS AND D	<u> </u>	12.	- Jiale	<u>  </u>	ANGES TO OFFICERS A	ND DIRECTORS	S IN 11		
TITLE	VAS	☐ Defete	TITLE	V/S		000385		Addition		
NAME STREET ADDRESS	ROSS, JOHN E		NAME STREET ADDRESS	[ ]	40	-03/13/01	-011280	116		
CITY-ST-ZIP	4655 SALISBURY RD STE 399 JACKSONVILLE FL 32256	•	CITY-ST-ZIP			****150.00				
TITLE	VAT	▼ Delete	TITLE	P/D			☐ Change	X Addition		
NAME	MILLER, JAMES J.		NAME		J. Brisk					
STREET ADDRESS CITY-ST-ZIP	5700 WILSHIRE BLVD STE 575 LOS ANGELES CA 90036		STREET ADDRESS CITY-ST-ZIP		est 52nd S York, NY	10019		Í		
TITLE	D.	X Delete	TITLE				Change	X Addition		
~- NAME	SUCHIL, SALLY	,	NAME	Micha		QQQ285 -03/13/01-		117		
STREET ADDRESS CITY-ST-ZIP	5700 WILSHIRE BLVD STE 575		STREET ADDRESS CITY-ST-ZIP		Broadway	10036***750.00	) ****75			
TITLE	LOS ANGELES CA 90036 SVCF	∑ Delete	TITLE	EV/D	York, NY	10036	☐ Change	Addition		
NAME	LANDSBAUM, ROSS G	DE DEIGNO	NAME		ric G. Rey	nolds	onlings	TAL THOMAS		
STREET ADDRESS	5700 WILSHIRE BLVD STE 575		STREET ADDRESS		Broadway					
CITY-ST-ZIP	LOS ANGELES CA 90036		CITY-ST-ZIP		<u>Kork, NY</u>	10036				
TITLE NAME	AS BOGGWODTH OBEED C	□ Delete     □	TITLE NAME	SV		•	Change			
STREET ADDRESS	BOGSWORTH, GREER C 5700 WILSHIRE BLVD STE 575		STREET ADDRESS		lam A. Ros	kin				
CITY-ST-ZIP	LOS ANGELES CA 90036		City-ST-ZIP		Broadway York, NY	10036				
TITLE	PD	🔀 Delete	TITLE		troller	<del></del>	☐ Change	Addition		
NAME OTREST LOODSOO	BACHMANN, PETER H		NAME	James	F. Davis			}		
STREET ADDRESS CITY-ST-ZIP	5700 WILSHIRE BLVD STE 575		STREET ADDRESS CITY-ST-ZIP		anwix Str			1		
	LOS ANGELES CA 90036  ertify that the information supplied with too this report or supplemental report is too.	his filing does not qualify for th	L	LP1EES ted in Sect	burgh PA	LDZZZ lorida Statutes. I further	certify that the in	formation		
indicated	on this report or supplemental report is t	rue and accurate and that my	signature shall h	ave the sa	me legal effect as	if made under nath: tha	Lam an officer	or director		

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 autress, with all other like empowered.

SIGNATURE:

1/25/01

904-281-4488

Daytime Phone #

pageral

## Attachment to 2000 Uniform Business Report for Charter Caribbean Company Document #598619

12. Additions/Chang	es 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	E
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	<del></del>
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	llene W. Stack	•
Street Address	1515 Broadway	
City, State, Zip	New York, NY 10036	