

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 801996

(0)

1. Corporation Name

HERNASCO CORPORATION



Principal Place of Business

17 EAST 47TH STREET
NEW YORK NY 10017

Mailing Address

17 EAST 47TH STREET
NEW YORK NY 10017

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

STEWART, CARL M.
C/O ULMER, MURCHISON, ASHBY & TAYLOR
200 W. FORSYTH ST., SUITE 1600
JACKSONVILLE FL 32201

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

09/12/1924

3a. Date of Last Report

02/02/1995

4. FEI Number

59-0288915

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

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0702 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 607.0305, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of State)

(Signature of Registered Agent or Secretary of State)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	SMADBECK, ARTHUR J.	
STREET ADDRESS	R. F. D. 65-A BOX 3	
CITY, ST, ZIP	EDGARTOWN MA	
TITLE	VD	☐ DELETE
NAME	HART, WILLIAM D., JR.	
STREET ADDRESS	DEER PARK ROAD	
CITY, ST, ZIP	NEW CANAAN CT	
TITLE	PD	☐ DELETE
NAME	SLOANE, HOWARD G.	
STREET ADDRESS	8 OAK LANE	
CITY, ST, ZIP	LARCHMONT NY	
TITLE	ST	☐ DELETE
NAME	ROSENBAUM, HOWARD	
STREET ADDRESS	328 E. 52ND STREET	
CITY, ST, ZIP	NEW YORK NY	
TITLE	VTD	☐ DELETE
NAME	SMADBECK, PAUL	
STREET ADDRESS	TITICUS ROAD, ROUTE 116	
CITY, ST, ZIP	NORTH SALEM NY	
TITLE	D	☐ DELETE
NAME	PRICE, THEODORE W.	
STREET ADDRESS	6709 RIVER RD.	
CITY, ST, ZIP	RICHMOND VA	

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 119.07(3)(k), 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 attached statement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Typed Name

Howard Rosenbaum HOWARD ROSENBAUM 1/31/96 212 371-7773

CR2E034 (12/95)

HERNASCO CORPORATION

<u>Name of Officers & Directors</u>	<u>Title</u>	<u>Address</u>	<u>City & State</u>
Sloane, Virginia	D	8 Oak Lane Larchmont, NY	10538
Guce, Renato	S/T	71-18 162nd Street Flushing, NY	11365
Obser, Fred	D	120 Violet Avenue Floral Park, NY	11001