

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

041167

DOCUMENT # 819220

1. Entity Name

KIDDER, PEABODY & CO., INCORPORATED

05-16-2001 90196 003 ***150.00

Principal Place of Business

**1000 HARBOR BLVD.
 WEEHAWKEN NJ 07087
 US**

Mailing Address

**1000 HARBOR BLVD.
 TAX DEPT. - 9TH FLR.
 WEEHAWKEN NJ 07087
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **13-5650440**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORP. SERVICE CO.
 1201 HAYS ST.
 TALLAHASSEE FL 32301**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME **DIORIO, ANTHONY M**
 STREET ADDRESS **1000 HARBOR BLVD.**
 CITY-ST-ZIP **WEEHAWKEN NJ 07087**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** ☐ Delete
 NAME **BERKOWITZ, HANNAH**
 STREET ADDRESS **1000 HARBOR BLVD.**
 CITY-ST-ZIP **WEEHAWKEN NJ 07087**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **CORKEY, F. DANIEL**
 STREET ADDRESS **1000 HARBOR BLVD.**
 CITY-ST-ZIP **WEEHAWKEN NJ 07087**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **NOLAN, WILLIAM J**
 STREET ADDRESS **1000 HARBOR BLVD.**
 CITY-ST-ZIP **WEEHAWKEN NJ 07087**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **BANYAI, GERALDINE L**
 STREET ADDRESS **1000 HARBOR BLVD.**
 CITY-ST-ZIP **WEEHAWKEN NJ 07087**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **AT** ☐ Delete
 NAME **LEVINE, KENNETH**
 STREET ADDRESS **1000 HARBOR BLVD.**
 CITY-ST-ZIP **WEEHAWKEN NJ 07087**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth Levine

4-09-01

Date

(201) 352-0559

Daytime Phone #

CR2E034 (10/00)

UBS PAINWEBBER INC.

Doc# 819220

656898

1000 Harbor Boulevard * Tax Department 9th Floor * Weehawken, NJ 07087 *

CERTIFIED MAIL #: _____

04/20/01

DEPT OF STATE
DIV OF CORPS/ANN. RPT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

Re: Kidder Peabody & Co. Inc.
Fein: 13-5650440

Gentlemen:

On behalf of the above captioned company, we are enclosing the following return:

ANNUAL REPORT

Enclosed also is a check in the amount of \$ 150.00 in payment of the indicated liability.

Should you have any questions regarding this filing please feel free to contact State Tax Manager, Louis DeVico at (201) 352-0559.

Very truly yours,~

Nancy Finelli

Nancy Finelli