## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # 819254 Apr 21, 2000 8:00 am Secretary of State 1. Entity Name CHRIS-CRAFT INDUSTRIES, INC. 04-21-2000 90120 026 \*\*\*150.00 Principal Place of Business Mailing Address 5355 TOWN CENTER RD 767 FIFTH AVENUE **46TH FLOOR BOCA RATON FL 33486-1068** NEW YORK NY 10153 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 94-1461226 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. CPD ☐ Change ☐ Addition TITLE ☐ Delete TITLE SIEGEL, HERBERT J. NAME NAME STREET ADDRESS STREET ADDRESS 767 FIFTH AVENUE, 46TH FLOOR CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** Director Change Addition TITLE ☐ Delete TITLE BARNETT, LAWRENCE R. NAME NAME Barnett, Lawrence R. STREET ADDRESS ONE TIMBER TRAIL STREET ADDRESS 34 Fincher Way CITY-ST-ZIP CITY-ST-ZIP RYE NY Rancho Mirage. - Change ☐ Addition □ ∩elete TITLE TITLE ROCHLIS, JAMES J. NAME NAME STREET ADDRESS STREET ADDRESS 150 E 69TH ST APT 28J CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** Senior Vice Pres/Secretary ☐ Delete TITLE TITLE KELLY, BRIAN C NAME NAME STREET ADDRESS STREET ADDRESS 767 FIFTH AVENUE, 46TH FLOOR CITY-ST-ZIP CITY-ST-7IP NEW-YORK NY Executive Vice President X Change . Addition TITLE TITLE Delete NAME SIEGEL, WILLIAM D NAME STREET ADDRESS 767 FIFTH AVENUE, 46TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY Senior Vice President/ (XI Change ☐ Addition ☐ Delete TITLE TITLE Treasurer MERKEL. JOELEN K NAME NAME STREET ADDRESS 5355 TOWN CENTER ROAD STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

**BOCA RATON FL** 

CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF RIGNING OFFICER OR DIRECTOR

Brian C