

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 843779

1. Entity Name

PW FRANKLIN CORPORATION

Principal Place of Business

1000 HARBOR BLVD
C/O TAX DEPT. 9TH FLOOR
WEEHAWKEN NJ 07087

Mailing Address

1000 HARBOR BLVD
C/O TAX DEPT. 9TH FLOOR
WEEHAWKEN NJ 07087

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 06-1005519

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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 PHANANJAY, PAL 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 DYER, STEPHEN R
STREET ADDRESS 1000 HARBOR BLVD
CITY-ST-ZIP WEEHAWKEN NJ 07087

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

TITLE S ☐ Delete
NAME MCLAUGHLIN, ELLEEN
STREET ADDRESS 1000 HARBOR BLVD
CITY-ST-ZIP WEEHAWKEN NJ

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

TITLE AT ☐ Delete
NAME LEVINE, KEN
STREET ADDRESS 1000 HARBOR BLVD
CITY-ST-ZIP WEEHAWKEN NJ

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP+D ☐ Change ☒ Addition
NAME Andrew Todd Clapp
STREET ADDRESS 1000 Harbor BLVD
CITY-ST-ZIP Weehawken NJ 07087

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Change ☒ Addition
NAME Geraldine L. Banyui
STREET ADDRESS 1000 Harbor BLVD
CITY-ST-ZIP Weehawken NJ

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: *Kenneth D Levine*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth D Levine

4/09/01

Date

(201)

352-4323

Daytime Phone #

656962



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

0441166

UBS PAINWEBBER INC.

DOC# 843779

656962

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

CERTIFIED MAIL #: _____

04/25/01

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

Re: PW Franklin Corporation
Fein: 06-1005519

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,



Adrienne Gilyard