

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 845202

1. Entity Name

PW IDLEWILD CORPORATION

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

05-16-2001 90198 034 \*\*\*150.00

Principal Place of Business

% TAX DEPARTMENT. 9TH FLOOR  
1000 HARBOR BLVD  
WEEHAWKEN NJ 07087

Mailing Address

% TAX DEPARTMENT. 9TH FLOOR  
1000 HARBOR BLVD  
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 13-3020129

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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 **PHANCANJAY, PAI M**  
STREET ADDRESS **1000 HARBOR BOULEVARD**  
CITY-ST-ZIP **WEEHAWKEN NJ 07087**

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

TITLE **S** ☐ Delete  
NAME **LAUGHLING, EILEEN M**  
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 BOULEVARD**  
CITY-ST-ZIP **WEEHAWKEN NJ**

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

TITLE **VP** ☐ Delete  
NAME **DYER, STEPHEN R**  
STREET ADDRESS **1000 HARBOR BOULEVARD**  
CITY-ST-ZIP **WEEHAWKEN NJ 07087**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **AS** ☐ Change ☒ Addition  
NAME **Gerakline L. Banyai**  
STREET ADDRESS **1000 Harbor Blvd**  
CITY-ST-ZIP **Weehawken, NJ 07087**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D/V** ☐ Change ☒ Addition  
NAME **Andrew Todd Clapp**  
STREET ADDRESS **1000 Harbor Blvd**  
CITY-ST-ZIP **Weehawken, NJ 07087**

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: *P*

*Ken Levine Ass't Treas. 4/25/01 201-352-0559*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

UBS PAINWEBBER INC.

DOC# 845202

656969

\* 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: PW Idlewild Corporation  
Fein: 13-3020129

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,



Lynn Muggelberg



UBS PaineWebber Inc.  
Tax Department, 9<sup>th</sup> Floor  
1000 Harbor Boulevard  
Weehawken, NJ 07087  
201-352-4418  
201-352-2443 fax  
ubspainewebber.com

DOC# 845202  
656967

**PW Idlewild Corporation**  
**FEIN – 13-3020129**

## **Officers & Directors Report**

### **Officers**

Dhananjay M. Pai	President	1000 Harbor Boulevard, Weehawken, NJ 07087
Andrew Todd Clapp	Vice President & Assistant Treasurer	1000 Harbor Boulevard, Weehawken, NJ 07087
Stephen R. Dyer	Vice President & Assistant Secretary	1000 Harbor Boulevard, Weehawken, NJ 07087
William J. Nolan	Treasurer	1000 Harbor Boulevard, Weehawken, NJ 07087
Kenneth D. Levine	Assistant Treasurer	1000 Harbor Boulevard, Weehawken, NJ 07087
Eileen McLaughlin	Secretary	1000 Harbor Boulevard, Weehawken, NJ 07087
Geraldine L. Banyai	Assistant Secretary	1000 Harbor Boulevard, Weehawken, NJ 07087
Victor J. Paci	Assistant Secretary	1000 Harbor Boulevard, Weehawken, NJ 07087
Rosemarie Albergo	Assistant Treasurer & Assistant Secretary	1000 Harbor Boulevard, Weehawken, NJ 07087

### **Directors**

Dhananjay M. Pai	1000 Harbor Boulevard, Weehawken, NJ 07087
Andrew Todd Clapp	1000 Harbor Boulevard, Weehawken, NJ 07087