

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**


**APPROVED  
AND  
FILED**

**1996 AUG 27 AM 11: 16**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

<b>PROFIT CORPORATION ANNUAL REPORT 1996</b>		<b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortnam Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 847830 (7)**  
 1. Corporation Name  
**SAWYER-FERGUSON-WALKER COMPANY, INC.**

  
**400001941714**  
 -09/09/96--01002--009  
 \*\*\*\*\*225.00 \*\*\*\*\*225.00

Principal Place of Business <b>405 LEXINGTON AVE. CHRYSLER BUILDING NEW YORK NY 10174-7014</b>	Mailing Address <b>405 LEXINGTON AVE. CHRYSLER BUILDING NEW YORK NY 10174-7014</b>
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<b>21</b> 2. Principal Place of Business <b>90 Park Avenue</b>	<b>26</b> 2a. Mailing Address <b>90 Park Avenue</b>
<b>22</b> Suite, Apt #, etc <b>10th Floor</b>	<b>27</b> Suite, Apt #, etc <b>10th Floor</b>
<b>23</b> City & State <b>New York, NY</b>	<b>28</b> City & State <b>New York, NY</b>
<b>24</b> Zip <b>10016-1301</b>	<b>29</b> Zip <b>10016-1301</b>
<b>25</b> Country	<b>30</b> Country

<b>3.</b> Date Incorporated or Qualified <b>12/31/1980</b>	<b>3a.</b> Date of Last Report <b>04/11/1995</b>
<b>4.</b> FEI Number <b>36-1731450</b>	Applied for Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
<b>8.</b> This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**  
**SIMPSON, RONALD**  
**3050 BISCAYNE BLVD STE 410**  
**MIAMI FL 33137**

**10. Name and Address of New Registered Agent**

<b>81</b> Name
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>
<b>84</b> City
<b>85</b> Zip Code <b>FL</b>

**11:** Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)

**12. OFFICERS AND DIRECTORS**

TITLE <b>PD</b>	NAME <b>THOMPSON, JONATHAN</b>	<input type="checkbox"/> DELETE
STREET ADDRESS <b>438 WEST 23RD ST.</b>	CITY - ST - ZIP <b>NEW YORK NY</b>	
TITLE <b>VPS</b>	NAME <b>SHEWITZ, KENNETH M</b>	<input type="checkbox"/> DELETE
STREET ADDRESS <b>11 MANITOU CIRCLE</b>	CITY - ST - ZIP <b>WESTFIELD NJ</b>	
TITLE <b>D</b>	NAME <b>FERGUSON, JAMES L</b>	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS <b>134 MEETING STREET</b>	CITY - ST - ZIP <b>CHARLESTON SC</b>	
TITLE <b>CO</b>	NAME <b>TOMLINSON, DANIEL S</b>	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS <b>6 DRURY LANE</b>	CITY - ST - ZIP <b>DEMEREST NJ</b>	
TITLE <b>D</b>	NAME <b>KELNBERGER, JOSEPH</b>	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS <b>4 BOULDER CIRCLE</b>	CITY - ST - ZIP <b>LARCHMONT NY</b>	
TITLE <b>D</b>	NAME <b>CURRENT, ROBERT</b>	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS <b>219 BAYBERRY LANE</b>	CITY - ST - ZIP <b>WESTPORT CT</b>	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<b>11</b> TITLE <b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>12</b> NAME <b>THOMPSON, JONATHAN</b>	
<b>13</b> STREET ADDRESS <b>438 WEST 23rd STREET</b>	
<b>14</b> CITY - ST - ZIP <b>NEW YORK, NY</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>21</b> TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>22</b> NAME <b>JOHN M. POWER</b>	
<b>23</b> STREET ADDRESS <b>86 TWIN FALLS ROAD</b>	
<b>24</b> CITY - ST - ZIP <b>BERKELEY HEIGHTS, NJ 07922</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>41</b> TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>42</b> NAME <b>JOHN W. POWER</b>	
<b>43</b> STREET ADDRESS <b>86 TWIN FALLS ROAD</b>	
<b>44</b> CITY - ST - ZIP <b>BERKELEY HEIGHTS, NJ 07922</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>51</b> TITLE <b>VPD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>52</b> NAME <b>HILLARY C. COLEMAN</b>	
<b>53</b> STREET ADDRESS <b>41 WAYNE AVENUE #103</b>	
<b>54</b> CITY - ST - ZIP <b>SUFFERN, NY 10901</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**SCC 8-27-96**

**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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Kenneth M Shewitz*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**KENNETH M SHEWITZ** VP/CKO  
 8-23-96 (212) 455 5665

CR2E034 (3/96)