

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90159 002 ***150.00

DOCUMENT # 852731

1. Entity Name
SEABURY & SMITH, INC.



Principal Place of Business
**1166 AVENUE OF THE AMERICAS, 31ST FLOOR
NEW YORK, NY 10036**

Mailing Address
**C/O MARSH TAX DEPT
121 RIVER ST, 5TH FLOOR
HOBOKEN, NJ 07030**

40066699



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

121 RIVER STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

TAX DEPT - 11TH FL.

City & State

City & State

HOBOKEN, NJ

Zip

Country

Zip

Country

07030

USA

04052007

Chg-P

CR2E034 (12/06)

4. FEI Number

13-3109248

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

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. I am familiar with, and accept the obligations of registered agent.

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
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
LISTON, STEVEN C
1776 W LAKES PKWY
WEST DES MOINES, IA 50398** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
KERSCHNER, BARRY
1166 AVE OF THE AMERICAS
NEW YORK, NY 10036** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**T
BARTLEY, MATTHEW
1166 AVE OF THE AMERICAS
NEW YORK, NY 10036** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TREASURER
ALAN BIELER
1166 AVE OF THE AMERICAS
NEW YORK, NY 10036** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
BIGLOTTI, JOSEPH
121 RIVER STREET
NEW YORK, NY 10036** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VICE PRESIDENT
JOSEPH P. GIGLIOTTI
121 RIVER STREET
HOBOKEN, NJ 07030** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BAILEY, JEROME H
1166 AVENUE OF THE AMERICAS, 31ST FLOOR
NEW YORK, NY 10036** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DIRECTOR
STEVEN H. KERR
500 WEST MONROE ST.
CHICAGO, IL 60661** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph P. Gigliotti **JOSEPH P. GIGLIOTTI** 4/6/07 (201) 284-4397
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #