

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 855877

1. Entity Name

BRUNDSCHWIG & FILS, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90087 048 ***150.00

Principal Place of Business

Mailing Address

75 VIRGINIA ROAD
N WHITE PLAINS NY 10603

75 VIRGINIA ROAD
N WHITE PLAINS NY 10603-2201

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-1820704

Applied For

Not Applicable

Zip

Country

Zip

Country

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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: 5/24/2000

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, 2000 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 PD ☐ Delete
NAME PEARDON, THOMAS P., JR.
STREET ADDRESS ROCKY HILL ROAD
CITY-ST-ZIP BRIDGEWATER CT

TITLE VD ☐ Delete
NAME DOUGLAS, MURRAY B.
STREET ADDRESS 35 EAST 67TH ST.
CITY-ST-ZIP NEW YORK NY

TITLE CFOT ☐ Delete
NAME WILLIAMSON, RICHARD A
STREET ADDRESS 2 TINYWOOD RD
CITY-ST-ZIP DARIEN CT

TITLE SD ☐ Delete
NAME FLAHERTY, JOHN
STREET ADDRESS 258 PEACEABLE STREET
CITY-ST-ZIP RIDGEFIELD CT

TITLE D ☐ Delete
NAME HORSEY, HENRY R.
STREET ADDRESS 327 S STATE ST
CITY-ST-ZIP DOVER DE

TITLE D ☐ Delete
NAME HUMES, GRAHAM
STREET ADDRESS 558 HILAIRE RD
CITY-ST-ZIP ST PETERSBURG

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

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

TITLE ☒ Change ☐ Addition
NAME WILLIAMSON, RICHARD
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 245 HANOVER ST.
CITY-ST-ZIP ANNAPOLIS, MD. 21403

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 290 KING OF PRUSSIA RD., SUITE 322
CITY-ST-ZIP RADNOR, PA 19087

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: Richard A. Williamson **REQUIRED** RICHARD A. WILLIAMSON 4/28/00 914-684-5800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2F034 (9/99)