

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2001 8:00 am
Secretary of State
 02-06-2001 90254 026 ***150.00

DOCUMENT # 855877

1. Entity Name
BRUNSCHWIG & FILS, INC.

Principal Place of Business
**75 VIRGINIA ROAD
 N WHITE PLAINS NY 10603**

Mailing Address
**75 VIRGINIA ROAD
 N WHITE PLAINS NY 10603**

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 **13-1820704**

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

**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

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

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

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

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

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

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

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

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **HORSEY, HENRY R.**
 CITY-ST-ZIP **245 HANOVER ST
 ANNAPOLIS MD 21403**

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **HUMES, GRAHAM**
 CITY-ST-ZIP **290 KING OF PRUSSIA RD, STE 322
 RADNOR PA 19087**

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

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* **RICHARD A. WILLIAMSON** 1/31/01 914-684-5800
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VP & CEO Date Daytime Phone #

CR2E034 (10/00)

Attachment
D# 855877
A0020375

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Brunschwig & Fils, Inc.

ATTACHMENT

11. OFFICERS AND DIRECTORS

TITLE: D
NAME: JEAN-CLAUDE VOLLENWEIDER
STREET ADDRESS: 26 WINTHROP DRIVE
CITY-ST-ZIP: RIVERSIDE, CT 06878
