2002 Uniform Business Report (UBR)

Apr 01, 2002 8:00 am Secretary of State DOCUMENT # F00000007004 1. Entity Name 04-01-2002 90050 031 ***150.00 GUND BUSINESS ENTERPRISES, INC. Principal Place of Business Mailing Address 1 CENTER COURT 1 CENTER COURT **CLEVELAND OH 44115 CLEVELAND OH 44115** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 34-1911128 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zin 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PCD F TITLE CR2E034 (9/01) ☐ Delete TITLE ☐ Addition ☐ Change NAME **GUND, GORDON** NAME STREET ADDRESS STREET ADDRESS 14 NASSAU STREET CITY-ST-ZIP CITY-ST-ZIP PRINCETON NJ 08540 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME **GUND, GEORGE III** STREET ADDRESS STREET ADDRESS 39 MESA STREET, SUITE 300, THE PRESIDIO CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94129 TITLE ☐ Delete TITI F Change ☐ Addition NAME NAME --WATSON, RICHARD-T STREET ADDRESS STREET ADDRESS 15555 NORTH PARK LANE CITY-ST-ZIP CITY-ST-ZIP CLEVELAND OH 44118 TITLE Delete TITLE ☐ Change ☐ Addition NAME THALER, WARREN A NAME STREET ADDRESS STREET ADDRESS 14 NASSAU STREET CITY-ST-ZIP PRINCETON NJ 08540 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STORNES, MARK R STREET ADDRESS STREET ADDRESS 1 CENTER COURT CITY-ST-ZIP CITY-ST-ZIP **CLEVELAND OH 44115** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR