

NOV. 4.2002 4:35PM

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**APPLICATION FOR REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**  
**Jim Smith**  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED #02000222172 7

02 NOV -5 AM 11:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # F01000001059**

1. Corporation Name  
**TUDOR INVESTMENT CORPORATION**

Principal Place of Business      Mailing Address

1275 KING STREET      1275 KING STREET  
 GREENWICH CT 06831      GREENWICH CT 06831

**REINSTATEMENT 2002**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable      3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

4. Date Incorporated or Qualified To Do Business in Florida      02/22/2001

5. FEI Number      22-2514825      Applied For      Not Applicable

6. CERTIFICATE OF STATUS DERIVED       20.75 Additional Fee Required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CD	JONES II, PAUL T	1275 KING STREET	GREENWICH CT
PD	DALTON, MARK F	1275 KING STREET	GREENWICH CT
D	McFARLANE III, JOHN G	1275 KING STREET	GREENWICH CT
D	PICKARD, MARK JOHN R. TORELL	1275 KING STREET	GREENWICH CT
D	PAUL, ANDREW S	1275 KING STREET	GREENWICH CT
D	PALLOTA, JAMES J	78 ROWES WHARF, 2ND FL SO 624	BOSTON MA

8. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2825

9. Name and Address of New Registered Agent

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 Suite, Apt. #, Etc. \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0506, F.S. or 617.0506, F.S.

Signature of Registered Agent \_\_\_\_\_ Date \_\_\_\_\_

**SIGNATURE REQUIRED**  
 REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(c), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

**SIGNATURE:** \_\_\_\_\_  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 11/04/02      (202) 863-8637

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<u>TITLE(s)</u>	<u>NAME OF OFFICERS AND/OR DIRECTORS</u>	<u>STREET ADDRESS OF EACH OFFICER AND/OR DIRECTOR</u>	<u>CITY/STATE/ZIP</u>
D	FISHER, RICHARD	3797 NEW GETWELL ROAD	MEMPHIS, TN
D	FORLENZA, ROBERT P	50 ROWES WHARF, 6 <sup>TH</sup> FLOOR	BOSTON, MA
D	HOUGHTON-BERRY, MARK	THE GREAT BURGH YEW TREE BOTTOM ROAD	EPSOM, SURREY UK

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Division of Corporations

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Florida Department of State  
Division of Corporations  
Public Access System

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From:

Account Name : CORPORATION SERVICE COMPANY /SAL  
Account Number : I20000000195  
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Fax Number : (850)521-1030

CORPORATION REINSTATEMENT

TUDOR INVESTMENT CORPORATION

Certificate of Status	0
Certified Copy	0
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