

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90229 035 ***150.00

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1. Entity Name
TAUNUS CORPORATION



Principal Place of Business

**60 WALL STREET
NEW YORK, NY 10005**

Mailing Address

**60 WALL STREET
NYC60-4006
NEW YORK, NY 10005**

60001774



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01062006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

13-4060471

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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, 2006 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 D ☐ Delete
NAME STEINBORN, EDWARD
STREET ADDRESS 60 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE D ☐ Change ☒ Addition
NAME Scott Bowen
STREET ADDRESS 60 Wall Street
CITY-ST-ZIP New York, NY

TITLE DT ☐ Delete
NAME FERGUSON, RICHARD W
STREET ADDRESS 60 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE D ☐ Change ☒ Addition
NAME Robert J. Dibble
STREET ADDRESS 60 Wall Street
CITY-ST-ZIP New York, NY 10005

TITLE DP ☐ Delete
NAME WAUGH, SETH H
STREET ADDRESS 60 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE D ☐ Change ☒ Addition
NAME Robert Khuzami
STREET ADDRESS 60 Wall Street
CITY-ST-ZIP New York, NY 10005

TITLE S ☒ Delete
NAME BYRNE, JAMES T JR
STREET ADDRESS 60 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10005

TITLE S ☒ Change ☐ Addition
NAME Peter Sturzinger
STREET ADDRESS 60 Wall Street
CITY-ST-ZIP New York, NY 10005

TITLE AS ☐ Delete
NAME OLSEN, SONJA K
STREET ADDRESS 60 WALL STREET
CITY-ST-ZIP NEW YORK, NY 10006

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Sonja K. Olsen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sonja K. Olsen
Assistant Secretary

1-11-06

212 250 0019

Date

Daytime Phone #