FILED Apr 30, 2003 8:00 am Secretary of State

FOR PROFIT CORPORATION

U	NIFORM BUŞINE	SS REPORT	(UE	3FR)	04-30-2003 90147	039 ***150.00	
DOCU 1. Entity Nan	MENT # F02000	2003767 esocts J	re.				
	renames		·				
	All the state of t			2346	*		
	DO NOT WRITE	in ihis si	AC		•		
2. Principal Place of Business 9805 Willows Road 3. Mailing Address 1 Campus Dr			ivo	M			
Suite, Apt. #, etc.		Suite Apt. #, etc. 3B Legal Department		DO NOT WRITE IN THIS SPACE			
City & Star Redmor	nd, WA	City & State Parsippany,			4. FEI Number 93–1004403	Applied For Not Applicable	
Zip 98052	Country USA	Zip 07054	Countr	у	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
少00002 空间探视器	USA	07034 (15-278)	USA		7. Name and Address of Current Registere		
				Name	poration Service Compa		
	DØ NOT WRITE				s (P.O. Box Number is Not Acceptable)		
	IN THIS SP	AGE :		120	I Hays Street		
	**************************************			City	lahassee FI	Zip Code 32301	
8. The above	named entity submits this statement for t	he purpose of changing its	registered		ed agent, or both, in the State of Florida. I am	10-00-	
the obligat	tions of registered agent.			•	•		
SIGNATURE .	Signature, typed or printed name of registered agent and	d title if applicable (NOTE	Registered /	Agent signature required v	when reinstating) DATE		
	nuary 1 - May 1 Fee is \$150.00 4 5 1			. ,	9. Election Campaign Financing	65.00	
Make Check	After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of S	tate			Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND D		A.M.		AND THE STREET STREET	to ALC: TARKETSA TO	
TITLE '	Director/EVP	•	a inter		THE PARTY OF THE P	12/02	
NAME	James E. Buckman		NAME				
STREET ADDRESS CITY-ST-ZIP	9 West 57th Street,	37th Floor	ST SHOP				
	New York, NY 10019 Director/Chairman		Marine Co.				
TITLE NAME	Stephen P. Holmes		NAME				
STREET ADDRESS	1 Campus Drive		STREET	ADDRESS			
CITY-ST-ZIP	Parsippany, NJ 0705	4 .	CITY	T-ZIP-0			
TITLE	Director/President		inte:		****	3,474.7	
NAME	William F. Peare _	ا جاء ال مشيد الديب است الم	NAME			- فر دون در الناسط الم	
STREET ADDRESS CITY-ST-ZIP	9805 Willows Road		STREET	ADDRESS	DO NOT WR	TENSON	
TITLE	Redmond, WA 98052		The second	Park Section		CONT. 1 EST. 9 NOT EST. SALE. IN	
NAME	Treasurer Duncan H. Cocroft		NAME	1 1 1/19	HE IN THIS SPA	GE##	
STREET ADDRESS				ADDRESS .			
CITY-ST-ZIP	Parsippany, NJ 0705	4	City	TOP	Extract Constitution of		
TITLE	Secretary		TIME				
NAME	Eric J. Bock	27-1 72	NAME TO REAL		Mary Control of the C		
STREET ADDRESS CITY-ST-ZIP	9 West 57th Street, 37th Floor New York, NY 10019			ADDRESS TPD	No. of the last of		
			Billio C			14 M. F. 19 1 M. P. 19	
NAME	Vice President Joseph Huber		3 NAME	1.0			
STREET ADDRESS	1 Cāmpus Drive		STREET	ADDRESS			
CITY-ST-ZIP	Parsippany, NJ 07054	4	ciryis	T-IP			
12. I hereby o	certify that the information supplied with the	nis filing does not qualify for	the exem	ption stated in Sec	tion 119.07(3)(i), Florida Statutes. I further ca	rtify 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 on an attachment with an address, with all other like empowered.

Joseph Huber, VP

Daytime Phone #