

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90015 009 ****61.25

DOCUMENT # F06000000060

1. Entity Name
DARBY GROUP COMPANIES, INC.



Principal Place of Business
**300 JERICO QUADRANGLE
JERICO, NY 11753**

Mailing Address
**300 JERICO QUADRANGLE
JERICO, NY 11753**

40040218



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02222007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
11-3168746

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

**UNITED CORPORATE SERVICES INC
9200 S DADELAND BLVD SUITE 508
MIAMI, FL 33156**

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

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
ASHKIN, MICHAEL
3890 PARL CENTRAL BLVD NORTH
POMPANO BEACH, FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COBD
Ashkin, Michael
800 Corporate Dr-Ste 208
Ft Lauderdale, FL 33334 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ASHKIN, CARL
300 JERICO QUADRANGLE
JERICO, NY 11753 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DCEO
Ashkin, Carl
300 Jericho Quadrangle
Jericho, NY 11753 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D S
KAHN, LAURA
300 JERICO QUADRANGLE
JERICO, NY 11753 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
Kahn, Laura
300 Jericho Quadrangle
Jericho, NY 11753 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CAPUTO, MICHAEL W
300 JERICO QUADRANGLE
JERICO, NY 11753 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
KAHN, LAURA
300 JERICO QUADRANGLE
JERICO, NY 11753 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst Secy
Justina Gordon
300 Jericho Quadrangle
Jericho, NY 11753 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
KAHN, SHEILA
3890 PARK CENTRAL BLVD NORTH
POMPANO BEACH, FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
Ashkin, Sheila
800 Corporate Dr-Ste 208
Ft Lauderdale, FL 33334 ☒ Change ☐ Addition

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 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #