## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F06000007741

FILED Jul 14, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
280 PARK AVE NEW YORK, NY 10017	US		
Current Mailing Address:		New Mailing Address:	
60 WALL STREET MAILSTOP: NYC60-4006 NEW YORK, NY 10005	US		
FEI Number: 20-5728606	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
C T CORPORATION SYS 1200 SOUTH PINE ISLAN PLANTATION, FL 33324	ND ROAD		
The above named entity s in the State of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATURE:			
	ic Signature of Registered Ag	1	Date

Title: () Delete Title: (X) Change ( ) Addition DOUG MCDONALD, DOUG Name: Name: 280 PARK AVE Address: 280 PARK AVE Address: City-St-Zip: NEW YORK, NY 10017 US City-St-Zip: NEW YORK, NY 10017 US Title: Title: (X) Change ( ) Addition () Delete PRISCILLA P NEWBURY, PRISCILLA P Name: Name: Address: 280 PARK AVE Address: 280 PARK AVE NEW YORK, NY 10017 US NEW YORK, NY 10017 US City-St-Zip: City-St-Zip: Title: Title: S ( ) Delete (X) Change ( ) Addition Name: SANDRA Name: WEST, SANDRA 60 WALL STREET Address: **60 WALL STREET** Address: City-St-Zip: NEW YORK, NY 10005 US City-St-Zip: NEW YORK, NY 10005 US Title: ( ) Delete Title: (X) Change ( ) Addition BENGSTON-OLIVIERI, ERIN **ERIN** Name: Name:

280 PARK AVE Address: Address: 280 PARK AVE NEW YORK, NY 10017 US NEW YORK, NY 10017 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA L WEST 07/14/2009 S