

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F07968 (3)

1. Corporation Name

MERRILL LYNCH SETTLEMENT SERVICES, INC.

Principal Place of Business

800 SCUDDERS MILL ROAD
PLAINSBORO NJ 08536

Mailing Address

800 SCUDDERS MILL ROAD
PLAINSBORO NJ 08536



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/05/1980

3a. Date of Last Report

07/14/1995

4. FEI Number

95-2656134

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEMS
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (and title if applicable)

(Date) Registered Agent Signature (and title if applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

PD
RAVEN, JULIA
8 RICHARDSON COURT
MARLBORO NJ

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ DELETE

VD
CIRINCION, JOHN C.
315 W. 70TH ST., #17-D
MARLBORO NJ

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TD
CHOMA, RICHARD J.
11 PARK HILL TERRACE
PRINCETON JCT. NJ

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

SD
WILDE, WILLIAM A.
23 MEADOW LANE
PENNINGTON NJ

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

D
LOWRY, BURNS M.
325 SE LUCIE BLVD.
STUART FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME ☐ Change ☐ Addition

1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE 2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS 2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE 3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE 4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE 5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE 6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard J. Choma
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard J. Choma, 100 Parkway

3/20/96
Date

1-693-821566
Daytime Phone #

CR2E034 (12/95)