

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F23444

1. Entity Name
FDP CORP.

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90175 005 ***150.00

Principal Place of Business

2140 S. DIXIE HIGHWAY
MIAMI FL 33133

Mailing Address

2140 S. DIXIE HIGHWAY
MIAMI FL 33133-2424

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2138243

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PICK, EDWARD 2417 N. GREENWAY DR. CORAL GABLES FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PRICE, BEVERLY 5600 SW 95 ST. MIAMI FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALVAREZ, CESAR 1221 BRICKWELL AVE, 22ND FLOOR MIAMI FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIRENBERG, BRUCE 774 GLENGARRY DR. MELBOURNE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHIFF, ALBERT J. 263 TRESSER BLVD, 10TH FLOOR STAMFORD CT	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FLEISCHMAN, RICHARD 17 INDIAN RIDGE RD S NATICK MA	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**SEE SCHEDULE
ATTACHED**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 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

MARK SILVERMAN

4/6/00

Date

305-658-6120

Daytime Phone #

CR2E034 (9/99)

724344

Attchment
724343

DOCUMENT # F23444
FDP CORP.
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Title: Director
Name: Michael K. Muratore
Street Address: 1285 Drummers Lane
City-ST-Zip: Philadelphia, PA 19087

Title: Director
Name: Lawrence A. Gross
Street Address: 1285 Drummers Lane
City-ST-Zip: Philadelphia, PA 19087

Title: Director
Name: Michael J. Ruane
Street Address: 1285 Drummers Lane
City-ST-Zip: Philadelphia, PA 19087

Title: Chairman, Chief Executive Officer
Name: Michael K. Muratore
Street Address: 1285 Drummers Lane
City-ST-Zip: Philadelphia, PA 19087

Title: President
Name: Michael C. Goldberg
Street Address: 2140 S. Dixie Hwy.
City-ST-Zip: Miami, FL 33133

Title: Executive Vice President
Name: Alfred J. Beram
Street Address: 2140 S. Dixie Hwy.
City-ST-Zip: Miami, FL 33133

Title: Senior Vice President
Name: Richard B. Fleischman
Street Address: 313 Speen St., #200
City-ST-Zip: Natick, MA 01760

Title: Senior Vice President
Name: Scott L. Price
Street Address: 2140 S. Dixie Hwy.
City-ST-Zip: Miami, FL 33133

Title: Senior Vice President, Chief Financial Officer
Name: Mark S. Silverman
Street Address: 2140 S. Dixie Hwy.
City-ST-Zip: Miami, FL 33133

Title: Vice President
Name: Kathleen Muro
Street Address: 2140 S. Dixie Hwy.
City-ST-Zip: Miami, FL 33133

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Title: Vice President
Name: Edward Pick
Street Address: 2140 S. Dixie Hwy.
City -ST-Zip: Miami, FL 33133

Title: Vice President
Name: Beverly Price
Street Address: 2140 S. Dixie Hwy.
City -ST-Zip: Miami, FL 33133

Title: Vice President
Name: Christine Stroud
Street Address: 2140 S. Dixie Hwy.
City -ST-Zip: Miami, FL 33133

Title: Vice President - Finance
Name: C. Joseph Slattery
Street Address: 32 Crosby Dr.
City -ST-Zip: Bedford, MA 01730

Title: Assistant Vice President, Assistant Secretary
Name: Sara G. Armstrong
Street Address: 1285 Drummers Lane
City -ST-Zip: Philadelphia, PA 19087

Title: Assistant Vice President, Assistant Secretary
Name: Andrew P. Bronstein
Street Address: 1285 Drummers Lane
City -ST-Zip: Philadelphia, PA 19087

Title: Assistant Vice President, Secretary
Name: Lawrence A. Gross
Street Address: 1285 Drummers Lane
City -ST-Zip: Philadelphia, PA 19087

Title: Assistant Vice President, Assistant Secretary, Assistant Treasurer
Name: Michael J. Ruane
Street Address: 1285 Drummers Lane
City -ST-Zip: Philadelphia, PA 19087