


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2006 8:00 am
Secretary of State

02-03-2006 90011 014 ***150.00

DOCUMENT # F75378 1. Entity Name ONE MAIN STREET, INC.					
Principal Place of Business ONE HSBC CENTER 27TH FLOOR BUFFALO, NY 14203			Mailing Address ONE HSBC CENTER 27TH FLOOR BUFFALO, NY 14203		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 59-2195663	
City & State Zip Country		City & State Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TUNG, GEA ONE HSBC CENTER BUFFALO, NY 14203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Mark Giansante One HSBC Center, Buffalo, NY 14203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAKER, J. RICHARD ONE HSBC CENTER BUFFALO, NY 14203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President John C. Lankes One HSBC Center, Buffalo, NY 14203	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIMPSON, JOSEPH R ONE HSBC CENTER BUFFALO, NY 14203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Richard J. Werner 8-10 E. 40th Street, New York, NY 10016	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUJAWA, HELEN ONE HSBC CENTER BUFFALO, NY 14203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Senior Vice President Craig Lassen 452 Fifth Avenue, New York, NY 10018	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NAGLE, GERALD A ONE HSBC CENTER BUFFALO, NY 14203	<input 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	AS PICKEL, PAMELA A ONE HSBC CENTER BUFFALO, NY 14203	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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 approved.					
SIGNATURE: _____			Assistant Secretary 2-1-06 716-841-4169 Date Daytime Phone #		



ATTACHMENT
40008313
#F75378

February 1, 2006

VIA UPS

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, Florida 32301

RE: One Main Street, Inc.

Dear Sir/Madam:

Enclosed for filing is the 2006 Annual Report along with check number 356160486 in the amount of \$150.00 made payable to the Florida Department of State with respect to One Main Street, Inc.

If you have any questions, please contact me at 716-841-4169. Thank you.

Very truly yours,

A handwritten signature in black ink, appearing to read "Pamela A. Pickel", written over a large, stylized, circular flourish.

Pamela A. Pickel
Assistant Corporate Secretary

Enclosures

cc: Helen Kujawa

FLDOS4