

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90031 010 ***150.00

DOCUMENT # F93000002448

1. Corporation Name

PENAMI CORPORATION



Principal Place of Business

C/O NORTHSTAR PRESIDIO MGMT CO LLC
411 WEST PUTNAM AVE. SUITE 270
GREENWICH CT 06830
US

Mailing Address

C/O NORTHSTAR PRESIDIO MGMT CO LLC
411 WEST PUTNAM AVE. SUITE 270
GREENWICH CT 06830
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1993

2. Principal Place of Business

21 SAME
Suite, Apt. #, etc.

2a. Mailing Address

26 NORTHSTAR
Suite, Apt. #, etc.

4. FEI Number

13-2669943

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

23 Zip Country

24 Zip Country

27 City & State

28 City & State

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME SABELLA, RICHARD
STREET ADDRESS 411 W PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

TITLE SVPC ☐ DELETE
NAME SCHACHTER, LAWRENCE R
STREET ADDRESS 411 W PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

TITLE EVP ☐ DELETE
NAME ROTHSCHILD, ALLAN B
STREET ADDRESS 411 W PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

TITLE VP ☐ DELETE
NAME HUMBER, CHARLES
STREET ADDRESS 411 W PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

TITLE VPTS ☐ DELETE
NAME REARDON, KEVIN
STREET ADDRESS 411 W PUTNAM AVE, SUITE 270
CITY-ST-ZIP GREENWICH CT 06830

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME Allan B. Rothschild
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME SVP, 600 + Treva
3.3 STREET ADDRESS J. Peter Paganeelli
3.4 CITY-ST-ZIP (same address)

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME Director
5.3 STREET ADDRESS Allan B. Rothschild
5.4 CITY-ST-ZIP (same address)

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-27-99 203
862-7032

CR2E034 (11/98)

0001516