2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2003 8:00 am
Secretary of State
08-11-2003 90285 010 ****61.25

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DOCUMENT # F94000000723

1. Entity Name
BARBIZON NATIONAL ADVERTISING COMMITTEE, INC.

[redacted]

X CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
~~2240 WOOLBRIGHT RD~~ ~~SUITE 300~~ ~~BOYNTON BEACH FL 33426~~ ~~US~~	~~2240 WOOLBRIGHT RD~~ ~~SUITE 300~~ ~~BOYNTON BEACH FL 33426~~ ~~US~~
2. Principal Place of Business 3111 N. University Dr Suite 406 Coral Springs FL 33065 USA	3. Mailing Address 3111 N. University Dr. Suite 406 Coral Springs, FL 33065 USA

4. FEI Number 13-3193988 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~BLANGIARDO, THOMAS~~ ~~2240 WOOLBRIGHT ROAD~~ ~~SUITE 300~~ ~~BOYNTON BEACH FL 33426~~	Name: Barry Rothberg - Officer Street Address (P.O. Box Number is Not Acceptable): 3111 N. University Dr. #406 City: Coral Springs FL 33065 FL Zip Code: 33065

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 _____ 7/29/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 10, 2003, min will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCORMICK, TIM Director ~~4401 WEST KENNEDY BLVD, #290~~ TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	4950 W. Kennedy Blvd Suite 200 Tampa, FL 33609 X Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NEMES, CHARLES Director ~~541 N. FAIRBANKS CT.~~ ~~CHICAGO IL 60611~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1051 Perimeter Dr. #950 Schaumburg, IL 60173 X Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~COMPOSEO, DOMENIC~~ ~~8316 PINEVILLE MATTHEWS #265~~ ~~CHARLOTTE NC 28226~~	X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Bernard, Joan 17B Trolley Square Wilmington, DE 19806 Director ☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~SKLAMBA, MARY~~ ~~3296 W MARKET ST SUITE A~~ ~~AKRON OH 44333~~	X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rothberg, Barry 3111 N. University Dr, #406 Coral Springs, FL 33065 Director ☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PST ~~BLANGIARDO, THOMAS~~ ~~2240 WOOLBRIGHT RD STE 300~~ ~~BOYNTON BEACH FL 33426~~	X Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Wasserman, Myron 607 Boylston St. 3rd Flr Boston, MA 02116 Director ☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (4/03)

12. 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 617, 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 empowered.

SIGNATURE: SIGNATURE REQUIRED 7/29/03 954 717 3249
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #