

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000002270 (6)

1. Corporation Name

J.J. MORGAN & COMPANY

Principal Place of Business

375 PARK AVE., STE. ~~310~~ 309
NEW YORK NY 10152

Mailing Address

375 PARK AVE., STE. ~~310~~ 309
NEW YORK NY 10152

2. Principal Place of Business

21

Suite, Apt. #, etc.

Change to Suite 309

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

Change to Suite 309

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

05/03/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

22-2866949

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA ST.
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, if not applicable,

(If not, Registered Agent Signature required when not filing)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
CEO
ORR, KENNETH
1365 YORK AVE.
NEW YORK NY 10021

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
CFO
GERSTEIN, ROBERT
225 E. 79TH ST., APT. 11D
NEW YORK NY 10021

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
COO
DROHAN, VINCENT
858 LARKFIELD RD.
ELWOOD NY 11731

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PRESIDENT
METTER, MICHAEL
300 EAST 56TH STREET
NEW YORK NY

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY- ST- ZIP
464 Links Drive South
North Hills, NY 11576

☐ Change ☐ Addition

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

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP
1 Tinker Lane
Greenwich, CT 06830

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

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

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***200.00

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5.1

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Gerstein, CFO

3/25/96

212-935-5000

Date

Daytime Phone #

CR2E034 (12/95)