

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000004515

1. Entity Name

INDEPENDENT & RETAIL BUSINESS ASSOCIATES, INC.

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90075 031 ***150.00

Principal Place of Business

Mailing Address

87 SOUTH MAIN STREET
WATERBURY VT 05676-0249
US

P.O. BOX 249
WATERBURY VT 05676-0249

2. Principal Place of Business

4 AIRLINE DRIVE

Suite, Apt. #, etc.

SUITE 202

3. Mailing Address

4 AIRLINE DRIVE

Suite, Apt. #, etc.

SUITE 202

City & State

ALBANY New York

Zip

12205

Country

US

City & State

ALBANY New York

Zip

12205

Country

US

4. FEI Number

03-0274163

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, STE. 105
TALLAHASSEE FL 32301

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 ☐ Delete
NAME DP
STREET ADDRESS GOLDSTEIN, LLOYD H
CITY-ST-ZIP 3010 WESTCHESTER AVE.
PURCHASE NY 10577

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME DVS
STREET ADDRESS LYNCH, HOWARD
CITY-ST-ZIP 2001 MARCUS AVE, STE W 85
LAKE SUCCESS NY

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME DVT
STREET ADDRESS STREET, ROBERT D
CITY-ST-ZIP 4 AIRLINE DR., ROOM 202
ALBANY NY 12205

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME STV
STREET ADDRESS HUDSON, DEBRA S
CITY-ST-ZIP 87 SOUTH MAIN ST.
WATERBURY VT 05676-0249

TITLE ☒ Change ☐ Addition
NAME DV
STREET ADDRESS LINDA M STREET
CITY-ST-ZIP 4 AIRLINE DRIVE ROOM 202
ALBANY, N.Y. 12205

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME DV
STREET ADDRESS WENDOLYN GOLDSTEIN
CITY-ST-ZIP 3010 WESTCHESTER AVENUE
PURCHASE, NY 10577

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Robert D Street

ROBERT D STREET DVT

Date

1/10/2000 1-518-4643347

Daytime Phone #

CFR2034 (9/99)