

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jul 19, 2001 8:00 am
Secretary of State

07-19-2001 90001 003 ***550.00

0106388 AT

DOCUMENT # F95000005968

1. Entity Name

GARNET PROPERTIES CORP.

Principal Place of Business

**130 LIBERTY STREET
M/S 2254
NEW YORK NY 10006
US**

Mailing Address

**130 LIBERTY ST.
C/O OFS-MS 2310
NEW YORK NY 10006
US**

2. Principal Place of Business

3. Mailing Address

130 Liberty Street-NYC02-3100

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Office of the Secretary

DO NOT WRITE IN THIS SPACE

City & State

City & State

New York NY

4. FEI Number

13-3705506

Applied For

Not Applicable

Zip

Country

Zip

10006

Country

U.S.A.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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	PD	<input type="checkbox"/> Delete
NAME	EGAN, JAMES D	
STREET ADDRESS	15 PAYNE WHITNEY LANE	
CITY-ST-ZIP	MANHASSET NY 11030	

TITLE	VP	<input type="checkbox"/> Delete
NAME	O'BRIEN, JAMES J	
STREET ADDRESS	7468 MAHOGANY BEND COURT	
CITY-ST-ZIP	BOCA RATON FL	

TITLE	S	<input type="checkbox"/> Delete
NAME	WEST, SANDRA L	
STREET ADDRESS	280 HENDERSON ST. #3-N	
CITY-ST-ZIP	JERSEY CITY NJ 07302	

TITLE	VD	<input type="checkbox"/> Delete
NAME	JOHNSON, ALEXANDER B	
STREET ADDRESS	1220 PARK AVENUE	
CITY-ST-ZIP	NEW YORK NY	

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	THELANDER, GARRETT	
STREET ADDRESS	8 BRIAR CLOSE	
CITY-ST-ZIP	LARCHMONT NY 10538	

TITLE	VP	<input type="checkbox"/> Delete
NAME	ADAMS, VINCENT F	
STREET ADDRESS	8357 DAMASCUS DRIVE	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	

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:

Sandra F. West/Secretary

July 9, 2001

212-250-2161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (5/01)