

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005 8:00 am
Secretary of State

04-18-2005 90554 029 ***150.00

DOCUMENT # F96000000526 1. Entity Name BRACEBRIDGE CORPORATION					
Principal Place of Business 1100 N. KING ST. WILMINGTON, DE 19884-2811 US			Mailing Address MS #2811 WILMINGTON, DE 19884-2811 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 51-0342747	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP WEAVER, LANCE L 1100 N. KING ST. WILMINGTON, DE 198842811	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	D Louis J. Freeh 1100 N. King St., MS 2811 Wilmington, DE 19884-2811	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DCEO BONAVOLONTA, JULES J 1100 N. KING ST. WILMINGTON, DE 198842811	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	CEO Director Chair Kenneth F. Boehl 1100 N. King Street, MS 2811 Wilmington, DE 19884-2811	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	EVP WRIGHT, VERNON H 1100 N. KING ST. WILMINGTON, DE 19884	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	Treasurer Thomas D. Wren 1100 N. King St., MS 2811 Wilmington, DE 19884-2811	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D VECCHIONE, KENNETH A 1100 N. KING ST. WILMINGTON, DE 198842811	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	EVP MESSICK, CHARLES K II 1100 N. KING ST. WILMINGTON, DE 19884	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	SEVP Thomas L. Cuccia 1100 N. King St., MS 2811 Wilmington, DE 19884-2811	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S SCHEFLEN, JOHN W 1100 N. KING ST. WILMINGTON, DE 19884	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	Secretary John P. Stanton 1100 N. King St., MS 2811 Wilmington, DE 19884-2811	☐ Change ☐ Addition
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 807, 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 I am empowered.					
SIGNATURE: <u>Nancy L. Manzano</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Nancy L. Manzano, Asst. Treasurer (302) 453-9930 Date Daytime Phone #	