

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003894

1. Entity Name

SULGRAVE REALTY CORPORATION

FILED

00 SEP 21 PM 3:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

ONE EXECUTIVE DRIVE  
FORT LEE NJ 07024

Mailing Address

ONE EXECUTIVE DRIVE  
FORT LEE NJ 07024

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 22-3453841

Applied for  
Not Applicable

Zip

Country

Zip

Country

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

NATIONAL CORPORATE RESEARCH LTD.  
1406 HAYS ST., STE 2  
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 \$550.00  
After SEPTEMBER 13, 2000 Min. 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  
NAME LUCIANI, JOHN  
STREET ADDRESS SUITE 350, 2650 N MILITARY TRAIL  
CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE VP+T  
NAME Catherine Merlino  
STREET ADDRESS One Executive Drive  
CITY-ST-ZIP Fort Lee NJ 07024 ☐ Change ☒ Addition

TITLE VSTD  
NAME RODIN, BERNARD M  
STREET ADDRESS ONE EXECUTIVE DRIVE  
CITY-ST-ZIP FORT LEE NJ ☒ Delete

TITLE VP  
NAME Gary Hopson  
STREET ADDRESS One Executive Drive  
CITY-ST-ZIP Fort Lee, NJ 07024 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE VP  
NAME Rebecca Menell  
STREET ADDRESS One Executive Drive  
CITY-ST-ZIP Fort Lee NJ 07024 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE Secretary  
NAME Keith Marlowe  
STREET ADDRESS One Executive Drive  
CITY-ST-ZIP Fort Lee NJ 07024 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition  
400003408194--9  
-03/28/00--01061--023  
\*\*\*\*750.00 \*\*\*\*750.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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: CATHERINE MERLINO  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/19/00 2878477322  
Date Daytime Phone #

CR2E034 (5/00)