

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90260 041 \*\*\*150.00

**DOCUMENT # F96000003973**

1. Entity Name  
**BEAR, STEARNS N.Y., INC.**



Principal Place of Business  
**383 MADISON AVE.  
 NEW YORK, NY 10179-0024**

Mailing Address  
**115 S. JEFFERSON RD.  
 WHIPPANY, NJ 07981**

**14009830**



01042005 Chg-P CR2E034 (10/03)

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

4. FEI Number  
**13-3261713**  
 Applied For  
 Not Applicable

Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GEISMAR, BRUCE E 383 MADISON AVE. NEW YORK, NY 10179 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOLINARO, SAMUEL L JR 383 MADISON AVE. NEW YORK, NY 10179 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HERSCH, RONALD M 383 MADISON AVE. NEW YORK, NY 10179 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WACHTEL, ELI 383 MADISON AVE. NEW YORK, NY 10179 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ARONSON, RAYMOND L 383 MADISON AVENUE NEW YORK, NY 101790024 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP SOLENDER, MICHAEL S 383 MADISON AVENUE NEW YORK, NY 101790024 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stt Attached List <input type="checkbox"/> Change <input type="checkbox"/> 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Bruce E. Geismar Date: 04/20/05 (212)272-2000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

14609830  
# F96000003973

**ATTACHMENT**  
**Bear Stearns N.Y., Inc.**  
Officers and Directors

April 15, 2005

<b>NAME</b>	<b>TITLE</b>	<b>CORPORATE ADDRESS</b>
Bruce E. Geismar	President / <b>Director</b>	One Metrotech Center North Brooklyn, NY 11201
Jeffrey M. Farber	Controller	One Metrotech Center North Brooklyn, NY 11201
Michael S. Solender	Executive Vice President	383 Madison Avenue, New York, NY 10179-0024
Ronald M. Hersch	Vice President / <b>Director</b>	383 Madison Avenue, New York, NY 10179-0024
Eli Wachtel	Vice President / <b>Director</b>	383 Madison Avenue, New York, NY 10179-0024
Samuel L. Molinaro Jr.	Treasurer / <b>Director</b>	383 Madison Avenue, New York, NY 10179-0024
Glenn V. Herman	Tax Director	One Metrotech Center North Brooklyn, NY 11201