

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90384 020 \*\*\*150.00

OST/BOOM  
AT

**DOCUMENT # F96000005137**

1. Entity Name  
**BLUE TEE CORP.**

Principal Place of Business      Mailing Address

**250 PARK AVE S., 2ND FLOOR**      **250 PARK AVE S., 2ND FLOOR**  
**NEW YORK NY 10003**                      **NEW YORK NY 10003**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.                      Suite, Apt. #, etc.

City & State                              City & State

Zip      Country                      Zip      Country

4. FEI Number      Applied For

**13-2925766**                      Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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

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, 2002 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>COBD SECRET, RICHARD A</b> <input type="checkbox"/> Delete <b>104 SHEARWATER CT E</b> <b>JERSEY CITY NJ 07305</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO</b> <input type="checkbox"/> Delete <b>SECRET, RICHARD A</b> <b>104 SHEARWATER CT E</b> <b>JERSEY CITY NJ 07305</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDC</b> <input type="checkbox"/> Delete <b>KELLY, WILLIAM M</b> <b>349 STERLING RD</b> <b>HARRISON NY 10528</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input checked="" type="checkbox"/> Delete <b>POLLAN, BERT</b> <b>175 E DERAWARE AP 6812</b> <b>CHICAGO IL 60611</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTS</b> <input type="checkbox"/> Delete <b>SMITH, GLENN A</b> <b>1370 JOHNSON DR</b> <b>WATCHUNG NJ 07060</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCAS</b> <input type="checkbox"/> Delete <b>ALLDIAN, DAVID P</b> <b>641 POINT AVE</b> <b>BRICK NJ 08724</b>

12. 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 checked="" type="checkbox"/> Addition <b>DIRECTOR</b> <b>Richard C. Spine</b> <b>135 HERBST ROAD</b> <b>CORAOPOLIS, PA 15108</b>
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

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: *Richard C. Spine*      4/9/02 212 598 0889

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/01)

*Attachment*

THE OFFICERS & DIRECTORS OF BLUE TEE CORP.

AS OF DECEMBER 14, 2001

# F96000005137

<u>TITLE</u>	<u>OFFICERS/DIRECTORS NAME:</u>
<u>CHAIRMAN OF THE BOARD/ CHIEF EXECUTIVE OFFICER/DIRECTOR</u>	<u>MR. RICHARD A. SECRIST</u> 104 SHEARWATER CT. E. JERSEY CITY, NJ 07305
<u>PRESIDENT CHIEF OPERATING OFFICER / DIRECTOR</u>	<u>MR. WILLIAM M. KELLY</u> 349 STERLING ROAD HARRISON, NEW YORK 10528
<u>VICE PRESIDENT/TREASURER/SECRETARY</u>	<u>MR. GLENN A. SMITH</u> 1370 JOHNSON DRIVE WATCHUNG, N. J. 07060
<u>VICE PRESIDENT/CONTROLLER ASSISSTANT SECRETARY</u>	<u>MR. DAVID P. ALLDIAN</u> 641 POINT AVENUE BRICK, N. J. 08724
<u>VICE PRESIDENT/DIRECTOR</u>	<u>MR. MICHAEL W. CALVERT</u> 2215 EAST GRAND AVENUE ENGLEWOOD, COLORADO 80110
<u>VICE PRESIDENT</u>	<u>MR. JEFFREY P. SMITH</u> 1725 HIGHWAY 326 SOUTH SOUR LAKES, TS 77659
<u>ASST. CONTROLLER/ASST. SECRETARY/ ASSISSTANT TREASURER</u>	<u>MR. JERRY D'AURIA</u> 48 CHESTNUT DRIVE MATAWAN, N.J. 07747
<u>DIRECTOR</u>	<u>MR. RICHARD C. SPINE</u> 135 HERBST ROAD CORAOPOLIS. PA 15108
<u>DIRECTOR</u>	<u>MR. ROBERT M. SONTHEIMER</u> 56 BEATRICE CIRCLE BELMONT, MA. 02478
<u>DIRECTOR</u>	<u>MR. CHRISTOPHER GLYNN</u> CLIFFORDSHIRE HOUSE SELSLEY, NR. STROUD, GLOUCESTERSHIRE, GL5 5LB, ENGLAND