

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

8/10/2005-90016-035-\$150.00-\$150.00

APPROVED  
AND  
FILED

05 SEP -6 AM 9:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00000010



07062005 No Chg-P CR2E034 (10/03)

4. FEI Number  
13-2737186

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

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

**DO NOT WRITE  
IN THIS SPACE**

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 *Cynthia L. Harris*  
Signature, typed or printed name of registered agent and title if applicable.

**Cynthia L. Harris**  
**as its agent**

9/16/05

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DSCE  
DENISCO, CHRISTOPHER R  
325 GREENWOOD DRIVE  
KEY BISCAYNE, FL 33149

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CFOD  
DERENONCOURT, LESLY J  
30 MERRIMAN RD  
STAMPORD, CT 06905

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DIBENEDETTO, MICHAEL JR  
148 HUDSON AVENUE  
LAKE GROVE, NY 11755

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HOPKINS, NEIL F  
823 STEAMBOAT ROAD  
GREENWICH, CT 06830

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HOPKINS, GREGORY J  
245 CRANWOOD DRIVE  
KEY BISCAYNE, FL 33149

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
RETTEBERGER, FRIEDRICH  
AM EULENHORST, 99B  
MUNICH, DE D-81827

*Please Remove  
No longer employed by SND*

**DO NOT WRITE  
IN THIS SPACE**

**K. Eckel SEP - 6 2005**

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 all other like empowered.

SIGNATURE: *Michael Dibeneditto, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-31-05 (203) 532-1212