

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000000700

1. Entity Name

CHADGOLD CORP.

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90142 017 ***150.00

906552



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

C/O THE NEWKIRK GROUP
100 JERICO QUAD STE 214
JERICO NY 11753
US

C/O THE NEWKIRK GROUP
100 JERICO QUAD STE 214
JERICO NY 11753-2702
US

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 **22-3105816**

Applied For

Not Applicable

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

UNITED STATES CORPORATION COMPANY
1201 HAYES ST, SUITE 105
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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCEO
ASHNER, MICHAEL
C/O THE NEWKIRK GRP 100 JERICO QUAD 214
JERICO NY 11753 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPAS
BRAVERMAN, PETER
C/O THE NEWKIRK GRP 100 JERICO QUAD #214
JERICO NY 11753 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
TIFFANY, CAROLYN
C/O THE NEWKIRK GRP 100 JERICO QUAD #214
JERICO NY 11753 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BONIFIELD, STEPHEN
C/O THE NEWKIRK GRP 100 JERICO QUAD #214
JERICO NY 11753 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst Secretary
Allison forrester
100 Jericho Quad #214
Jericho, NY 11753 ☐ Change ☒ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STR
JOHNSON, LARA SWEENEY
C/O THE NEWKIRK GRP 100 JERICO QUAD #214
JERICO NY 11753 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Add

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Allison Forrester
Asst Secretary
1/17/2000
516 822 0022