

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002363

1. Entity Name

N.P. INVESTMENT XVII CO.

**FILED**  
**Apr 03, 2000 8:00 am**  
**Secretary of State**

04-03-2000 90019 001 \*\*\*450.00

Principal Place of Business

1201 ELM ST., #5400  
DALLAS TX 75270

Mailing Address

1201 ELM ST., #5400  
DALLAS TX 75270-2103

2. Principal Place of Business

3 WORLD FINANCIAL CENTER

3. Mailing Address

101 HUDSON STREET

Suite, Apt. #, etc.

29 TH FLOOR

Suite, Apt. #, etc.

TAX DEPT 39TH FLOOR

City & State

NEW YORK NEW YORK

City & State

JERSEY CITY NEW JERSEY

Zip

10285

Country

US

Zip

07302

Country

US

4. FEI Number

75-2704493

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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          | PD                    | <input checked="" type="checkbox"/> Delete |
| NAME           | WALSH, MARK           |  |
| STREET ADDRESS | 1201 ELM ST., #5400   |  |
| CITY-ST-ZIP    | DALLAS TX 75270       |  |
| TITLE          | VSD                   | <input type="checkbox"/> Delete            |
| NAME           | MARSAN, DEAN          |  |
| STREET ADDRESS | 1201 ELM STREET #5400 |  |
| CITY-ST-ZIP    | DALLAS TS 75270       |  |
| TITLE          | S                     | <input checked="" type="checkbox"/> Delete |
| NAME           | HYDE, JOE T           |  |
| STREET ADDRESS | 1201 ELM STREET #5400 |  |
| CITY-ST-ZIP    | DALLAS TX 75270       |  |
| TITLE          | S                     | <input checked="" type="checkbox"/> Delete |
| NAME           | BRAUN, MARGRET        |  |
| STREET ADDRESS | 1201 ELM STREET #5400 |  |
| CITY-ST-ZIP    | DALLAS TX 75270       |  |
| TITLE          | D                     | <input checked="" type="checkbox"/> Delete |
| NAME           | MEYLOR, EDWARD        |  |
| STREET ADDRESS | 1201 ELM STREET #5400 |  |
| CITY-ST-ZIP    | DALLAS TX 75270       |  |
| TITLE          |                       | <input type="checkbox"/> Delete            |
| NAME           |                       |  |
| STREET ADDRESS |                       |  |
| CITY-ST-ZIP    |                       |  |

|                |                               |  |
|----------------|-------------------------------|--|
| TITLE          | DV                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | JOSEPH J FLANNERY             |  |
| STREET ADDRESS | 3 WORLD FINANCIAL CENTER      |  |
| CITY-ST-ZIP    | NEW YORK NEW YORK 10285       |  |
| TITLE          | DV                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | DEAN K MARSAN                 |  |
| STREET ADDRESS | 101 HUDSON STREET             |  |
| CITY-ST-ZIP    | JERSEY CITY NJ 07302          |  |
| TITLE          | S                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | Jennifer Marre                |  |
| STREET ADDRESS | 3 WORLD FINANCIAL CENTER      |  |
| CITY-ST-ZIP    | NEW YORK NEW YORK 10285       |  |
| TITLE          | V                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | BARRY J. O'BRIEN              |  |
| STREET ADDRESS | 101 HUDSON STREET             |  |
| CITY-ST-ZIP    | JERSEY CITY, NEW JERSEY 07302 |  |
| TITLE          | DV                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | CHRISTOPHER S MCKENNA         |  |
| STREET ADDRESS | 3 WORLD FINANCIAL CENTER      |  |
| CITY-ST-ZIP    | NEW YORK, NEW YORK 10285      |  |
| TITLE          |                               | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                               |  |
| STREET ADDRESS |                               |  |
| CITY-ST-ZIP    |                               |  |

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

**BARRY J. O'BRIEN**  
First Vice President

Date

Daytime Phone #

3/20/00 (201) 524-5822

CR2E034 19/99