

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

0573472

DOCUMENT # F97000005571

1. Entity Name
N.P. INVESTMENT XXIV CO.

05-17-2001 90114 001 ***750.00

Principal Place of Business 3 WORLD FINANCIAL CENTER 29TH FLOOR NEW YORK NY 10285 US	Mailing Address 101 HUDSON STREET TAX DEPARTMENT 39TH FLOOR JERSEY CITY NJ 07302 US
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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 75-2730193	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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
State 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, 2001 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	DV	<input type="checkbox"/> Delete
NAME	FLANNERY, JOSEPH J	
STREET ADDRESS	3 WORLD FIN CENTER	
CITY-ST-ZIP	NEW YORK NY 10285	
TITLE	DV	<input type="checkbox"/> Delete
NAME	MARSAN, DEAN	
STREET ADDRESS	101 HUDSON ST	
CITY-ST-ZIP	JERSEY CITY NJ 07302	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MCKENNA, CHRISTOPHER S	
STREET ADDRESS	3 WORLD FIN CENTER	
CITY-ST-ZIP	NEW YORK NY 10285	
TITLE	P	<input type="checkbox"/> Delete
NAME	CHO, YON K	
STREET ADDRESS	3 WORLD FIN CENTER	
CITY-ST-ZIP	NEW YORK NY 10285	
TITLE	S	<input type="checkbox"/> Delete
NAME	MARRE, JENNIFER	
STREET ADDRESS	3 WORLD FIN CENTER	
CITY-ST-ZIP	NEW YORK NY 10285	
TITLE	V	<input type="checkbox"/> Delete
NAME	OBRIEN, BARRY J	
STREET ADDRESS	101 HUDSON STREET	
CITY-ST-ZIP	JERSEY CITY NJ 07302	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: *Barry J. O'Brien* **Barry J. O'Brien Vice President** 4-27-01 (201) 524-5822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)