FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: Steven R. Crane

SIGNATURE AND TYPED OR PRINTED N

Mar 06, 2001 8:00 am DOCUMENT # F9800001074 Secretary of State LIMERICK FINANCIAL CORPORATION 03-06-2001 90356 039 ***150.00 Principal Place of Business Mailing Address 101 MORGAN LANE. STE 180 101 MORGAN LANE, STE 180 PLAINSBORO NJ 08536 PLAINSBORO NJ 08536 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 22-3565171 Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) TITLE Delete TITLE ☐ Change ☐ Addition CUNNINGHAM, JAMES I NAME 1040 BELAIRE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL CITY-ST-ZIP VISD XX Delete VTSD ☐ Change XX Addition MORRIS, THERESA C NAME Crane, Steven R. 101 MORGAN LANE STE 180 STREET ADDRESS STREET ADDRESS 101 Morgan Lane, Suite 180 PLAINSBORO NJ 08536 CITY-ST-ZIP CITY-ST-ZIP Plainsbo<u>ro, NJ 08536</u> TITLE Delete TITLE Change Addition YANG, PHILIP L NAME NAME 101 MORGAN LANE, STE 180 STREET ADDRESS STREET ADORESS PLAINSBORO NJ CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.