

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **H53053** (5)  
1. Corporation Name

**SCOTTSWOOD ENTERPRISES, INC.**



Principal Place of Business

Mailing Address

C/O THE BROADSTONE GROUP, INC  
888 7TH AVE. STE 3400  
NEW YORK NY 10106

C/O THE BROADSTONE GROUP, INC  
888 7TH AVE. STE 3400  
NEW YORK NY 10106

3. Date Incorporated or Qualified  
**04/19/1985**

3a. Date of Last Report  
**01/31/1995**

4. FEI Number  
**59-2521892**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERGER, MITHCELL W.  
BERGER & SHAPIRO  
100 NE 3RD AVE, STE 400  
FT. LAUDERDALE FL 33301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the principal place of business of registered agent and the corporation

(If not, Registered Agent signature required when re-filing)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **PD WALLACE, STEPHANIE**  
STREET ADDRESS **888 SEVENTH AVENUE, SUITE 3400**  
CITY-ST-ZIP **NEW YORK NY**

TITLE ☒ DELETE  
NAME **V GROSSI, NICHOLAS**  
STREET ADDRESS **888 7 AVE**  
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ DELETE  
NAME **S SPOTO, ANTONINA L**  
STREET ADDRESS **888 7 AVE**  
CITY-ST-ZIP **NEW YORK NY**

TITLE ☒ DELETE  
NAME **TAS RICCI, MICHAEL**  
STREET ADDRESS **888 SEVENTH AVENUE, SUITE 3400**  
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME **V BORY, JUDITH**  
2.3 STREET ADDRESS **888 SEVENTH AVENUE, SUITE 3400**  
2.4 CITY-ST-ZIP **NEW YORK, NY 10106**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME **T/AS COLLINS, KEVIN**  
4.3 STREET ADDRESS **888 SEVENTH AVENUE, SUITE 3400**  
4.4 CITY-ST-ZIP **NEW YORK, NY 10106**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Judith Bory*

Judith Bory

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96

212-333-2100

Date

Corporate Phone

CR2E034 (12/95)