2000 UNIFORM BUSINESS REPORT (UBR) FILED May 23, 2000 8:00 am Secretary of State DOCUMENT # L78890 BED BATH & BEYOND OF SAWGRASS, INC. 05-23-2000 90231 028 ***150.00 Principal Place of Business Mailing Address 650 LIBERTY AVE LIBERTY AVE NJ 07083 UNION NJ 07083-8107 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 22-3056776 Not Applicable Zip Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL-CORPORATION SYSTEM, INC. 1201 HAYES STREET SUITE 105 TALLAHASSEE FL 32301 30 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change ☐ Addition PD ☐ Delete TITLE TITLE EISENBERG, WARREN NAME NAME STREET ADDRESS STREET ADDRESS 650 LIBERTY AVE CITY-ST-ZIP CITY-ST-ZIP **UNION NJ** VSD ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME FEINSTEIN, LEONARD NAME STREET ADDRESS STREET ADDRESS 110 BI COUNTY BLVD CITY-ST-ZIP CITY-ST-ZIP **FARMINGDALE NY 11735** Addition ☐ Delete TITLE TITLE CURWIN, RONALD NAME NAME STREET ADDRESS STREET ADDRESS 650 LIBERTY AVE CITY-ST-ZIP CITY-ST-ZIP Union NJ ☐ Delete ☐ Change ☐ Addition Vas TITLE TITLE TEMARES, STEVEN NAME STREET ADDRESS 650 LIBERTY AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP UNION NJ ASSISTANT TREASURER Change Addition Delete TITLE TITLE EUGENE A. CASTAGNA NAME NAME STREET ADDRESS 650 LIBERTY AVE, STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>UNION NJ 07083</u> ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR EUGENE A. CASTAGNA Date Days time Phone #