2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 17, 2004 8:00 am Secretary of State DOCUMENT # L85207 --1. Entity Name 02-17-2004 90042 009 ***150.00 REUNION STUART, INC. Principal Place of Business Mailing Address C/O DAVID M. KUCHINOS ONE LOGAN SQUARE PHILADELPHIA PA 19103-6998 C/O DAVID M. KUCHINOS ONE LOGAN SQUARE PHILADELPHIA PA 19103-6998 94016630 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 23-2612494 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ~ ---- = CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Sinnature, 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. Election Campaign Financing **\$5.00** May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE Change Addition TITLE Delete CHURCH, JULIA R NAME NAME STREET ADDRESS STREET ADDRESS HELVETIA CT., S. ESPLANADE ST. PETER PORT, GUERNSEY UK CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME MOUNTFORD, CHRISTOPHER P HELVETIA CT., S. ESPLANADE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST. PETER PORT, GUERNSEY UK CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME GLANFIELD, PHILIP J NAME ---STREET ADDRESS THE WILLOWS, NOCQ ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST SAMPSONS, GUERNSEY UK Change ☐ Addition TITLE Delete TITLE GREEN, RICHARD W NAME NAME HAMPSLEY COTTAGE, RUE COHU STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CASTEL GUERNSEY, UK CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not abalify 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

RICHARD W. GREEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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