FILED

Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90179 035 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

M48134 DOCUMENT

1. Entity Name

Principal Place of Business

WOODBRIDGE NJ 07095

% BESSEMER TRUST COMPANY

100 WOODBRIDGE CENTER DRIVE

BARTON INVESTMENT COMPANY



Mailing Address BESSEMER TRUST CO ATTN ANGELO CAMPANILE 100 WOODBRIDGE CTR DR WOODBRIDGE NJ 07095

			•				<u>ali: Bara di Bilani aban</u>
2. Principal Place of Business		3. Mailing Address		J (8)	1989) (515 8529) (5859) (1989) (5 51)		Sil Digit Bibit 1881
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Num	4. FEI Number 59-2796879		Applied For
Zip	Country	Zip	Country	5. Certifica	te of Status Desired	\$8.75 Fee Regi	Not Applicable Additional
<u> </u>	6. Name and Address of Curren	t Registered Agent_		7. Name ar	nd Address of New Registe		
			Name	<u> </u>		nou rigorit	
	CORPORATION SERVICE COMPANY			draga (B.O. Bay Normal	per is Not Acceptable)		
1	YES STREET		Sileer Add	ness (r.O. Box North	per is Not Acceptable)		
TALLAHA	ISSEE FL 32301				<u> </u>		
			City	FL Zip Code			
8. The above	e named entity submits this statement f tions of registered agent.	or the purpose of changing its	registered office or re	egistered agent, or b	oth, in the State of Florida.	am familiar wi	th, and accept
o oonga	acons or registered agent.						. ,
SIGNATURE	Cianton						٠
	Signature, typed or printed name of registered agent	t and title il applicable. (NOT	E: Registered Agent signature	required when reinstating)	D,	ATE -	
FILE NOW!!! FEE IS \$150.00							
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State) 9. E	lection Campaign Financing rust Fund Contribution.	_ ~~	.00 May Be
.10.				"	dat i and Contribution,	□ A00	ded to Fees
TITLE	OFFICERS AND		11.	ADDITIONS	/CHANGES TO OFFICERS	AND DIRECTO	PS IN 11
NAME	KIESEWETTER, JAYNE BARTON	☐ Delete	TITLE			☐ Change	e 🔲 Addition
STREET ADDRESS MEADOWBROOK #C-104 13254 POLO CLUB RD		POLO CLUB PO	NAME STREET ADDRESS				
CITY-ST-ZIP	W PALM BEACH FL	· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP				
TITLE	VD	☐ Delete	TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	e ☐ Addition
STREET ADDRESS	Gerstein, Herbert 111 E. Shore RD.		NAME			_ "	
CITY-ST-ZIP	MANHASSET NY		STREET ADDRESS				
TITLE	STD		CITY-ST-ZIP				
NAME	POWER, AUSTIN J., JR.	☐ Delete	TITLE NAME			☐ Change	Addition
STREET ADDRESS	630 5TH AVE. 38TH FLOOR		STREET ADDRESS				
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP				
TITLE	VD	☐ Delete	TITLE				
NAME	CAMPANILE, ANGELO, D		NAME	,		☐ Change	☐ Addition
STREET ADDRESS %BESSEINER TRUST CO 100 WOODBRIDGE CTR DR			STREET ADDRESS				
CITY-ST-ZIP	WOODBRIDGE NJ 07095		CITY - ST - ZIP				
TITLE	SD SAPTON OUADI	☐ Delete	TITLE	· <u> </u>		Change	Addition
NAME STREET ADDRESS	BARTON, SHARI 2920 UPTON ST, NW		NAME				
CITY-ST-ZIP	WASHINGTON DC		STREET ADDRESS				
TITLE	THE STATE OF THE S		CITY-ST-ZIP				
NAME		☐ Delete	TITLE			Change	☐ Addition
STREET ADDRESS	2		NAME STREET ADDRESS				
CITY-ST-ZIP		0	CITY-ST-ZIP				

12. I hereby certify that the information supplied with this filing poes 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 tue and accurate and that my soprature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of tustee sympowered 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.

SIGNATURE: