

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000000525

1. Entity Name

BAYSWATER TAMPA BAY, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -4 PM 1:24

Principal Place of Business

C/O BAYSWATER REALTY & CAPITAL CORP.
100 SOUTH BEDFORD ROAD
MT KISCO NY 10549

Mailing Address

C/O BAYSWATER REALTY & CAPITAL CORP.
100 SOUTH BEDFORD ROAD
MT KISCO NY 10549-3425



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-4024794

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

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

500003128875-1

-02/09/00--01016--022

City

****50.00 **28650.00

FL

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 \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE MGR
NAME ANTENUCCI, ALBO J JR
STREET ADDRESS 100 SOUTH BEDFORD ROAD
CITY-ST-ZIP MT KISCO NY 10549 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE MGR
NAME GARY FRIEDLAND
STREET ADDRESS 100 SOUTH BEDFORD ROAD
CITY-ST-ZIP MT. KISCO, NY 10549 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE MGR
NAME WILLIAM BURKE
STREET ADDRESS 100 SOUTH BEDFORD ROAD
CITY-ST-ZIP MT. KISCO, NY 10549 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE MGR
NAME ROCHAEL BRADLEY
STREET ADDRESS ICAHN & CO., INC., 1 WALL ST. CT., 9TH FL.
CITY-ST-ZIP NEW YORK, NY 10005 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE MGR
NAME GAIL GOLDEN
STREET ADDRESS ICAHN ASSOCIATES CORP., 767 5TH AVE., 47TH FL.
CITY-ST-ZIP NEW YORK, NY 10153 ☐ Change ☒ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

ALBO ANTENUCCI, JR.

1/31/00

Date

(914) 241-9000

Daytime Phone #