

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000018258

1. Entity Name

FT. LAUDERDALE FEET, INC.

249

FILED

Apr 24, 2001 8:00 am  
Secretary of State

04-24-2001 90331 042 \*\*\*150.00

Principal Place of Business

Mailing Address

933 MACARTHUR BOULEVARD  
MAHWAH NJ 07430

933 MACARTHUR BOULEVARD  
MAHWAH NJ 07430

00040009



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

6215 N. ANDREWS AVE  
Suite, Apt. #, etc.

933 MacARTHUR BLVD.  
MAHWAH NJ 07430

City & State

FT. LAUDERDALE FL

City & State

MAHWAH NJ

4. FEI Number

05-0984698

Applied For

Not Applicable

Zip

Country

Zip

Country

33309

5. Certificate of Status Desired ☐

\$8.75 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)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME JEFFREY A. GORDON  
STREET ADDRESS  
CITY-ST-ZIP 933 MacARTHUR BLVD., MAHWAH, NJ 07430

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME VP KATHLEEN GUINNESSY  
STREET ADDRESS  
CITY-ST-ZIP 933 MacARTHUR BLVD., MAHWAH, NJ 07430

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME S MAUREEN RICHARDS  
STREET ADDRESS  
CITY-ST-ZIP 933 MacARTHUR BLVD., MAHWAH, NJ 07430

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME AS ROBERT K. SCHILLING  
STREET ADDRESS  
CITY-ST-ZIP 933 MacARTHUR BLVD., MAHWAH, NJ 07430

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME T KATHLEEN GUINNESSY  
STREET ADDRESS  
CITY-ST-ZIP 933 MacARTHUR BLVD., MAHWAH, NJ 07430

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME D MARC G. SCHUBACK  
STREET ADDRESS  
CITY-ST-ZIP 933 MacARTHUR BLVD., MAHWAH, NJ 07430

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marc G. Schuback  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

201-934-2000  
Daytime Phone #

CR2E034 (10/00)