

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90208 045 ***150.00

DOCUMENT # P11136

1. Entity Name

FINE HOST CORPORATION



Principal Place of Business

**3 GREENWICH OFFICE PARK
GREENWICH CT 06831
US**

Mailing Address

**3 GREENWICH OFFICE PARK
ATTN: ANGELINE MCDONOUGH
GREENWICH CT 06831
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **06-1156070**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **C** ☐ Delete
NAME **HABERMAN, NORMAN**
STREET ADDRESS **995 HOT SPRINGS BLVD**
CITY-ST-ZIP **SANTA BARBARA CA 93108**

TITLE **VT** ☐ Delete
NAME **SEDLARZ, KARL H**
STREET ADDRESS **170 GILLIES AVENUE**
CITY-ST-ZIP **NORWALK CT 06854**

TITLE **GPEB** ☒ Delete
NAME **SIMKISS, MARK**
STREET ADDRESS **1002 FOXBORO DRIVE**
CITY-ST-ZIP **NORWALK CT 06851**

TITLE **VSGC** ☐ Delete
NAME **KEATS, ELLEN**
STREET ADDRESS **42 PERKINS ROAD**
CITY-ST-ZIP **GREENWICH CT 06830**

TITLE **P** ☒ Delete
NAME **VERROS, CHRIS**
STREET ADDRESS **15 PLANTATION ROAD**
CITY-ST-ZIP **MANSFIELD MA 02048**

TITLE **PC** ☒ Delete
NAME **JANTZEN, ROBERT J**
STREET ADDRESS **605 VALLEY DRIVE**
CITY-ST-ZIP **NEW CANAAN CT 06840**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President & Chairman** ☒ Change ☐ Addition
NAME **Norman Habermann**
STREET ADDRESS **995 Hot Springs Blvd.**
CITY-ST-ZIP **Santa Barbara, CA 93108**

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

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STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ellen Keats
Ellen Keats Secretary
Date **1/13/03** Daytime Phone #

CR2E034 (10/02)