

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16926

FILED
Feb 08, 2012
Secretary of State

Entity Name: METS PARTNERS, INC.

Current Principal Place of Business:

CITI FIELD
123-01 ROOSEVELT AVE
FLUSHING, NY 11368

New Principal Place of Business:

Current Mailing Address:

CITI FIELD
123-01 ROOSEVELT AVE
FLUSHING, NY 11368

New Mailing Address:

FEI Number: 11-2843028 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: WILPON, FRED
Address: SHEA STADIUM
City-St-Zip: FLUSHING, NY 11368 US

Title: DP
Name: KATZ, SAUL
Address: SHEA STADIUM
City-St-Zip: FLUSHING, NY 11368 US

Title: SEVP
Name: WILPON, JEFFREY
Address: SHEA STADIUM
City-St-Zip: FLUSHING, NY 11368 US

Title: COOD
Name: WILPON, JEFFREY
Address: SHEA STADIUM
City-St-Zip: FLUSHING, NY 11368 US

Title: EVP
Name: HOWARD, DAVID
Address: SHEA STADIUM
City-St-Zip: FLUSHING, NY 11368 US

Title: D
Name: WILPON, RICHARD
Address: SHEA STADIUM
City-St-Zip: FLUSHING, NY 11368 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID HOWARD

EVP

02/08/2012

Electronic Signature of Signing Officer or Director

Date