

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 14 1998 8:00am
Secretary of State

DOCUMENT # **P22715** (7)

1. Corporation Name
KONOVER MANAGEMENT CORPORATION



Principal Place of Business

**2410 ALBANY AVENUE
WEST HARTFORD CT 06117**

Mailing Address

**2410 ALBANY AVENUE
WEST HARTFORD CT 06117**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/25/1989

4. FEI Number

06-1110121

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23. City & State

24 Zip **25** Country

2a. Mailing Address

26 c/o Cohen, Gershman & Wakim, P.C.

27 Suite, Apt. #, etc.

27. City & State

28 West Hartford, CT 06117

29 Zip **30** Country

06117 **U.S.A.**

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81. Name

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

000002588740

-07/14/98--01078--036

84. City

*****165.00**

FL

85. Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE

NAME **GOMAN, R. MICHAEL**
STREET ADDRESS **2410 ALBANY AVENUE**
CITY-ST-ZIP **WEST HARTFORD CT 06117**

TITLE **EVP** ☐ DELETE

NAME **SMITH, ALAN E.**
STREET ADDRESS **2410 ALBANY AVE.**
CITY-ST-ZIP **W. HARTFORD CT**

TITLE **S** ☒ DELETE

NAME **GERSHMAN, DONALD S.**
STREET ADDRESS **2410 ALBANY AVE.**
CITY-ST-ZIP **W. HARTFORD CT**

TITLE **TD** ☐ DELETE

NAME **COHEN, RICHARD D.**
STREET ADDRESS **2410 ALBANY AVE.**
CITY-ST-ZIP **W. HARTFORD CT**

TITLE **D** ☐ DELETE

NAME **KONOVER, MICHAEL**
STREET ADDRESS **2410 ALBANY AVENUE**
CITY-ST-ZIP **W. HARTFORD CT**

TITLE **SEVP** ☐ DELETE

NAME **KONOVER, SIMON**
STREET ADDRESS **2410 ALBANY AVE**
CITY-ST-ZIP **W. HARTFORD CT 06117**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **S** ☒ Change ☐ Addition

1.2 NAME **James Wakim**
1.3 STREET ADDRESS **2410 Albany Avenue**
1.4 CITY-ST-ZIP **West Hartford, CT 06117**

2.1 TITLE **SVP** ☐ Change ☒ Addition

2.2 NAME **John J. Anderson**
2.3 STREET ADDRESS **345 North Main Street**
2.4 CITY-ST-ZIP **West Hartford, CT 06117**

3.1 TITLE **SVP** ☐ Change ☒ Addition

3.2 NAME **Lisa Whitney**
3.3 STREET ADDRESS **345 North Main Street**
3.4 CITY-ST-ZIP **West Hartford, CT 06117**

4.1 TITLE **SVP** ☐ Change ☒ Addition

4.2 NAME **Richard C. Liljedahl**
4.3 STREET ADDRESS **2410 Albany Avenue**
4.4 CITY-ST-ZIP **West Hartford, CT 06117**

5.1 TITLE **EVP** ☐ Change ☒ Addition

5.2 NAME **Steven A. Abney**
5.3 STREET ADDRESS **2410 Albany Avenue**
5.4 CITY-ST-ZIP **West Hartford, CT 06117**

6.1 TITLE **AS** ☐ Change ☒ Addition

6.2 NAME **Susan W. Vinhais**
6.3 STREET ADDRESS **2410 Albany Avenue**
6.4 CITY-ST-ZIP **West Hartford, CT 06117**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment, with an address.

SIGNATURE

7/8/98 (860) 222-5510

CR2E034 (5/98)

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COHEN, GERSHMAN & WAKIM, P.C.
ATTORNEYS AT LAW

DONALD S. GERSHMAN
JAMES E. WAKIM
ANTHONY CROSBY
LAWRENCE E. MERLIN
ROBERT A. RANDICH
MARILYN K. GRODY

RICHARD D. COHEN
OF COUNSEL

2410 ALBANY AVENUE
WEST HARTFORD, CONNECTICUT 06117

TELEPHONE (860) 233-5519
FACSIMILE (860) 523-9180

July 8, 1998

Division of Corporations
Attention: Annual Reports
P.O. Box 6327
Tallahassee, Florida 32314

Re: Konover Management Corporation

Dear Sir/Madam:

Enclosed herewith is the 1998 Annual Report for Konover Management Corporation ("KMC") for the State of Florida and a check made payable to the Department of State in the amount of \$165.00. Please be advised that this document (labeled "2nd Notice") was received in our office on July 1, 1998 and that we have no records of any prior annual report form having been sent to us this year.

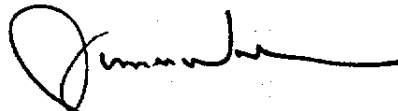
Please be advised that last year, a similar problem occurred and we did not receive the 1997 Annual Report Form until July 21, 1997. KMC was authorized to do business in Florida on January 25, 1989 and annual reports have always been submitted to the State of Florida on a timely basis. We request that you treat the enclosed annual report as being filed timely, as well.

Please check our records to ensure that you have the correct mailing address, as we would like to eliminate the problem of not receiving the Annual Report Form early enough to file prior to May 1. For future reference, the annual report for Konover Management Corporation should be mailed to: Cohen, Gershman & Wakim, P.C., 2410 Albany Avenue, West Hartford, CT 06117.

Thank you for your assistance in this matter.

Very truly yours,

KONOVER MANAGEMENT CORPORATION



James Wakim
Secretary

JM/md
Enclosures