

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90169 017 ***150.00

DOCUMENT # P28159

1. Corporation Name

CORRESPONDENT SERVICES CORPORATION



Principal Place of Business

% TAX DEPT. 9TH FLOOR
1000 HARBOR BLVD
WEEHAWKEN NJ 07087

Mailing Address

% TAX DEPT. 9TH FLOOR
1000 HARBOR BLVD
WEEHAWKEN NJ 07087

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1990

4. FEI Number

22-2999831

Applied For

No: 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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 ☐ DELETE

NAME BASSO, ROBERT
STREET ADDRESS 1000 HARBOR BLVD
CITY-STATE-ZIP WEEHAWKEN NJ

TITLE ☐ DELETE

NAME HAUGHEY, DOROTHY F.
STREET ADDRESS 1000 HARBOR BLVD
CITY-STATE-ZIP WEEHAWKEN NJ

TITLE ☐ DELETE

NAME NOLAN, WILLIAM J.
STREET ADDRESS 1000 HARBOR BLVD
CITY-STATE-ZIP WEEHAWKEN NJ 07087

TITLE ☒ DELETE

NAME BRUCK, HOWARD
STREET ADDRESS 1000 HARBOR BLVD
CITY-STATE-ZIP WEEHAWKEN NJ

TITLE ☒ DELETE

NAME HANS, JUNE
STREET ADDRESS 1000 HARBOR BLVD
CITY-STATE-ZIP WEEHAWKEN NJ

TITLE ☐ DELETE

NAME LEVINE, KEN
STREET ADDRESS 1000 HARBOR BLVD
CITY-STATE-ZIP WEEHAWKEN NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

Sr. Vice-Pres.
Ted B. Jackson
1000 Harbor Blvd.
Weehawken, NJ 07087
Vice-President
Donna M. Fontana
1000 Harbor Blvd.
Weehawken, NJ 07087

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)