2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P30696

Country

C T CORPORATION SYSTEM

8751 WEST BROWARD BLVD. PLANTATION FL 33324

6. Name and Address of Current Registered Agent

1. Entity Name

Zip

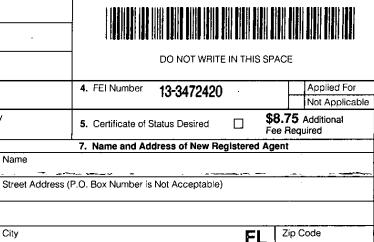
PRENTICE SECURITIES INC.

THERMOE GEOGRAPIES INC.		
Principal Place of Business	Mailing Address	
90 BROAD STREET NEW YORK NY 10004	90 BROAD STREET NEW YORK NY 10004	
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

Zip

FILED Feb 13, 2001 8:00 am Secretary of State

02-13-2001 90584 045 ***150.00



			City			FL	Zip Code	Э		
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										
• This core										
, , , , , ,			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00		10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. □ Added to Fees					
(See criteria on back) Make Check Payable to Department of State							Added	IO Fees		
11. OFFICERS AND DIRECTORS				AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	PD	☐ Delete	THTLE				Change	☐ Addition		
NAME	TIERNEY, MICHAEL		NAME							
STREET ADDRESS	90 BROAD STREET		STREET ADDRESS							
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP				3			
TITLE		☐ Delete	TITLE			L] Change	Addition		
NAME	LAWLER, ROBERT J.		NAME							
STREET ADDRESS CITY-ST-ZIP	1 HILLSIDE ROAD		STREET ADDRESS CITY-ST-ZIP							
	BRONXVILLE NY					<u></u>	7.0			
TITLE	· •	☐ Delete	TITLE			L] Change	☐ Addition		
NAME STREET ADDRESS	PANZER, MELVYN E.		NAME STREET ADDRESS							
CITY-ST-ZIP	-16-ENSIGN-DRIVE	The second second second	CITY-ST-ZIP	•						
	S						7.0+	□ Address		
TITLE NAME	BALUYO, CATHERINE	☐ Delete	TITLE NAME			L	Change	☐ Addition		
STREET ADDRESS	126 BENTLEY AVE		STREET ADDRESS							
CITY-ST-ZIP	JERSEY CITY NEW JERSEY		CITY-ST-ZIP		•					
TITLE	SV	☐ Delete	TITLE				7 Change	☐ Addition		
NAME	BURKE, BARBARA J	2000	NAME			_	- - -			
STREET ADDRESS	110 6TH ST		STREET ADDRESS	,						
CITY-ST-ZIP	SOMERSET NJ		CITY-ST-ZIP	•						
TITLE	SV	☐ Delete	TITLE		the state of the s		Change	☐ Addition		
NAME	BOSWELL, JOHN		NAME							
STREET ADDRESS	171 E 83RD ST		STREET ADDRESS							
CITY-ST-ZIP	NEW YORK NY		CITY-ST-ZIP							
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										

Country

Name

ental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if an address with all that like oppositions. indicated on this report or supplem of the corporation or the receiver of changed, or on an attachment with

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert J. Lawler-EVP

02/07/01

212-785-7700

Daytime Phone #