**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **P32332** **(9)**

1. Corporation Name
**GEORGE G. ZIMMERMAN & COMPANY, INC.**

Principal Place of Business
101 GIBRALTAR DRIVE
3E
MORRIS PLAINS NJ 07950

Mailing Address
101 GIBRALTAR DRIVE
3E
MORRIS PLAINS NJ 07950

3. Date Incorporated or Qualified: 12/31/1990
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 22-2327144 — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes XX No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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's signature required when resigning — DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | PCD | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | ZIMMERMAN, GEORGE G. | | 1.2 NAME | | |
| STREET ADDRESS | 931 NORSOTA WAY | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | SARASOTA FL 34242 | | 1.4 CITY-ST-ZIP | | |
| TITLE | DV | ☐ DELETE | 2.1 TITLE | D | XX Change ☐ Addition |
| NAME | SCHILLER, EUGENE J. | | 2.2 NAME | | |
| STREET ADDRESS | 1229 CLEAR SPRING DR. | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | UPLAND CA 91786 | | 2.4 CITY-ST-ZIP | | |
| TITLE | S | ☐ DELETE | 3.1 TITLE | | XX Change ☐ Addition |
| NAME | FORREST, NORBASINE A. | | 3.2 NAME | Forrest, Norbatine A. | |
| STREET ADDRESS | 4 BARBARA STREET | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | PARSIPPANY NJ 07054 | | 3.4 CITY-ST-ZIP | | |
| TITLE | DV | X DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | SHARKEY, CHARLES J. | | 4.2 NAME | | |
| STREET ADDRESS | 198 MOUNTAIN AVE. | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | GILLETTE NJ 07933 | | 4.4 CITY-ST-ZIP | | |
| TITLE | VT | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | KINNEY, THOMAS D. | | 5.2 NAME | | |
| STREET ADDRESS | 8 YORK RD. | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | NEWTON, NJ. 07860 | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 hereunder, or on an attachment with an address.

**SIGNATURE:** Thomas D. Kinney, VP & Controller 1/18/96 201-292-0101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)