

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P39853

1. Entity Name

GUARDIAN INVESTOR SERVICES CORPORATION

Principal Place of Business

201 PARK AVE. SOUTH
NEW YORK NY 10003

Mailing Address

ATTN: SHEREEN ELEFANTE
P.O. BOX 26220
LEHIGH VALLEY PA 18002-6220
US

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7 Hanover Square

3. Mailing Address

Suite, Apt. #, etc.

City & State

New York, NY

City & State

4. FEI Number

13-2615338

Applied For

Not Applicable

Zip

10004

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME SMITH, JOHN M
STREET ADDRESS 201 PARK AVE. SOUTH
CITY-ST-ZIP NEW YORK NY 10003 ☒ Delete

TITLE VD
NAME KANE, EDWARD K
STREET ADDRESS 201 PARK AVE. SOUTH
CITY-ST-ZIP NEW YORK NY 10003 ☐ Delete

TITLE C
NAME POTTER, RICHARD T JR
STREET ADDRESS 201 PARK AVE. SOUTH
CITY-ST-ZIP NEW YORK NY 10003 ☐ Delete

TITLE V
NAME SULLIVAN, DONALD
STREET ADDRESS 3900 BURGESS PLACE
CITY-ST-ZIP BETHELEHEM PA 18017 ☐ Delete

TITLE T
NAME HARRY, EARL
STREET ADDRESS 201 PARK AVENUE SOUTH
CITY-ST-ZIP NEW YORK NY ☐ Delete

TITLE D
NAME CUMISKEY, RICHARD A
STREET ADDRESS P.O. BOX 26220
CITY-ST-ZIP LEHIGH VALLEY PA 18002-6221 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Long, Bruce
STREET ADDRESS 7 Hanover Square
CITY-ST-ZIP New York, NY 10004 ☐ Change ☒ Addition

TITLE VD
NAME Kane, Edward K.
STREET ADDRESS 7 Hanover Square
CITY-ST-ZIP New York, NY 10004 ☒ Change ☐ Addition

TITLE C
NAME Potter, Richard T. Jr.
STREET ADDRESS 7 Hanover Square
CITY-ST-ZIP New York, NY 10004 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME Harry, Earl
STREET ADDRESS 7 Hanover Square
CITY-ST-ZIP New York, NY 10004 ☒ Change ☐ Addition

TITLE AVP
NAME Cumiskey, Richard A.
STREET ADDRESS P.O. Box 26205
CITY-ST-ZIP Lehigh Valley, PA 18002-6221 ☒ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f) Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Cumiskey Assistant Vice President 1-800-533-0099 option 2

Date

Daytime Phone #

1/11/2000

SP