

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000027711

FILED
Apr 04, 2002 8:00 AM
Secretary of State

Entity Name: ACORN DERIVATIVES MANAGEMENT CORP.

Current Principal Place of Business:

29-107 VISTA GARDEN TRAIL
VERO BEACH, FL 32962

New Principal Place of Business:

Current Mailing Address:

ONE BARKER AVENUE
WHITE PLAINS, NY 10601

New Mailing Address:

FEI Number: 13-3716440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELVIN, WILLIAM O J.R.
29-107 VISTA GARDEN TRAIL
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELVIN, WILLIAM O JR.
Address: 14 ROCKLEDGE ROAD
City-St-Zip: SCARBOROUGH MANOR, NY

Title: V () Delete
Name: BOYLE, ROBERTA G
Address: 56 MOUNTAINVIEW DRIVE
City-St-Zip: BROOKFIELD, CT 06804

Title: VS () Delete
Name: GREELEY, ANDREW
Address: 786 PALMER ROAD 3-D
City-St-Zip: BRONXVILLE, NY 10708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTA G. BOYLE

V

04/04/2002

Electronic Signature of Signing Officer or Director

Date