

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 # P94000017235 (0)

1. Corporation Name

GOOSE POND CORPORATION



Principal Place of Business

Mailing Address

%STATE BOARD OF ADMINISTRATION
1230 BLOUNTSTOWN HWY.
TALLAHASSEE FL 32314

%STATE BOARD OF ADMINISTRATION
1230 BLOUNTSTOWN HWY.
TALLAHASSEE FL 32314
US

3. Date Incorporated or Qualified
03/04/1994

3a. Date of Last Report
04/18/1995

2. Principal Place of Business

2a. Mailing Address

21 STATE BOARD OF ADMINISTRATION

26 STATE BOARD OF ADMINISTRATION

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1801 HERMITAGE BOULEVARD

27 1801 HERMITAGE BOULEVARD

City & State

City & State

23 TALLAHASSEE FLORIDA

28 TALLAHASSEE FLORIDA

Zip

Country

Zip

Country

24 32308

25 USA

29 32308

30 USA

9. Name and Address of Current Registered Agent

4. FEI Number
59-3294419

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 ☒ No

10. Name and Address of New Registered Agent

SCHOW, HORACE II
1230 BLOUNTSTOWN HWY.
TALLAHASSEE FL 32314

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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 the applicable

DATE Registered Agent's Signature (required when new change)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BENNETT, DOUGLAS W
STREET ADDRESS 1230 BLOUNTSTOWN HWY.
CITY-ST-ZIP TALLAHASSEE FL 32314 ☒ DELETE

TITLE D
NAME MILLER, TODD A
STREET ADDRESS 1230 BLOUNTSTOWN HWY.
CITY-ST-ZIP TALLAHASSEE FL 32314 ☒ DELETE

TITLE ST
NAME SPARKS, KERRY J.
STREET ADDRESS 1230 BLOUNTSTOWN HWY
CITY-ST-ZIP TALLAHASSEE FL ☒ DELETE

TITLE VP
NAME DARK, JOHN W.
STREET ADDRESS 51 JFK PKWY
CITY-ST-ZIP SHORT HILLS NJ ☒ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☒ Addition
1.2 NAME JOHN W. DARK
1.3 STREET ADDRESS 51 JFK PARKWAY
1.4 CITY-ST-ZIP SHORT HILLS, NEW JERSEY 07078

2.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
2.2 NAME LUANNE G. BRILL
2.3 STREET ADDRESS 1801 HERMITAGE BOULEVARD
2.4 CITY-ST-ZIP TALLAHASSEE, FLORIDA 32308

3.1 TITLE SECRETARY & TREASURER ☐ Change ☒ Addition
3.2 NAME VICTOR A. DEL PIZZO
3.3 STREET ADDRESS 51 JFK PARKWAY
3.4 CITY-ST-ZIP SHORT HILLS, NEW JERSEY 07078

4.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
4.2 NAME NOYCE W. BURT
4.3 STREET ADDRESS ONE RAVINIA DRIVE, SUITE 1400
4.4 CITY-ST-ZIP ATLANTA, GA 30346

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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)(a), 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.

SIGNATURE:

VICTOR A. DEL PIZZO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
VICTOR A. DEL PIZZO, SECRETARY & TREASURER

4/17/96 201-912-7931

CR2E034 (12/95)