

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90104 011 ***150.00

629490



DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000054991

1. Entity Name

SAVANNAH MGP CORP.

Principal Place of Business

Mailing Address

ATTN: ROBERT T. MICHAELSON
 156 W 56TH STREET, 12TH FLOOR
 NEW YORK NY 10019

ATTN: ROBERT T. MICHAELSON
 156 W 56TH STREET, 12TH FLOOR
 NEW YORK NY 10019-3800

2. Principal Place of Business

c/o Norman G. Orodener
Tillinghast Licht Perkins
 Suite, Apt. #, etc.

3. Mailing Address

c/o Norman G. Orodener
Tillinghast Licht Perkins
 Suite, Apt. #, etc.

10 Weybosset St., 10th Floor

10 Weybosset St., 10th Floor

City & State
Providence, RI

City & State
Providence, RI

4. FEI Number **13-4009154**

Applied For
 Not Applicable

Zip
02903-2818

Country
UCS

Zip
02903-2818

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SAIA, CHRISTOPHER H
200 SOUTH BISCAYNE BLVD SUITE 2500
MIAMI FL 33131-2336

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **ALTMAN, RONALD**
 STREET ADDRESS **C/O WAM, 156 W. 56TH ST., 12TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY**

TITLE ☒ Change ☐ Addition
 NAME **Director**
 STREET ADDRESS **Daniel Cohen**
 CITY-ST-ZIP **One Kenney Drive Cranston, RI 02920**

TITLE **P** ☒ Delete
 NAME **MICHAELSON, ROBERT T**
 STREET ADDRESS **C/O WAM, 156 W. 56TH ST., 12TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY**

TITLE ☒ Change ☐ Addition
 NAME **President**
 STREET ADDRESS **Daniel Cohen**
 CITY-ST-ZIP **One Kenney Drive Cranston, RI 02920**

TITLE **V** ☒ Delete
 NAME **GANG, MARTIN**
 STREET ADDRESS **C/O WAM, 156 W. 56TH ST., 12TH FLOOR**
 CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ Change ☒ Addition
 NAME **Treasurer**
 STREET ADDRESS **Douglas Brown**
 CITY-ST-ZIP **One Kenney Drive Cranston, RI 02920**

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☒ Addition
 NAME **Secretary**
 STREET ADDRESS **Norman G. Orodener**
 CITY-ST-ZIP **10 Weybosset St., 10th Floor Providence, RI 02903**

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☒ Addition
 NAME **Director**
 STREET ADDRESS **Bernard Schretter**
 CITY-ST-ZIP **115 Constitution Boulevard Franklin, MA 02038**

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☒ Addition
 NAME **Director**
 STREET ADDRESS **Joel Poretsky**
 CITY-ST-ZIP **405 Lexington Avenue New York, NY 10174**

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 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary

3/16/00

401-456-1200ext. 333

Date

Daytime Phone #

CR2E034 (9/99)