

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90057 047 ***150.00

DOCUMENT # P99000078114

1. Entity Name

CARROLLWOOD COMMONS OUTPARCEL CORP.

Principal Place of Business

**3333 NEW HYDE PARK RD.
 NEW HYDE NY 11042-0020**

Mailing Address

**3333 NEW HYDE PARK RD.
 NEW HYDE NY 11042-0020**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3600486

Applied For

Not Applicable

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

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

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, 2001 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D COOPER, MILTON	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3333 NEW HYDE PARK RD. NEW HYDE NY 11042-0020		
<input type="checkbox"/> Delete	D KIMMEL, MARTIN S	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3333 NEW HYDE PARK RD. NEW HYDE NY 11042-0020		
<input type="checkbox"/> Delete	D FLYNN, MICHAEL J	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Yarmak, Joel I.
	3333 NEW HYDE PARK RD. NEW HYDE NY 11042-0020		← same
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VP Pappagallo, Mike
			same
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	T Cohen, Glenn
			same
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	S Kawderer, Bruce
			same

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

Joel I. Yarmak

4/26/01

Date

(516) 869-9000

Daytime Phone #

CR2E034 (10/00)