

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2001
APPLICATION
FOR
REINSTATEMENT
FOR
DOCUMENT # S36426

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name

TPBC ACQUISITION CORP.

Principal Place of Business

Mailing Address

ONE NSBC CENTER
15TH FLOOR
BUFFALO NY 14203

ONE NSBC CENTER
15TH FLOOR
BUFFALO NY 14203

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

ONE HSBC CENTER - 27TH FL

Suite, Apt. #, etc.

ONE HSBC CENTER - 27TH FLOOR

City & State

BUFFALO, NY

City & State

BUFFALO, NY

Zip

14203

Country

USA

Zip

14203

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/08/1991

5. FEI Number

16-1392391

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City, State, Zip
1	2	3	4
P	NAGLE, GERALD A	ONE NSBC CENTER HSBC	BUFFALO NY 14203
VP	BAKER, J. RICHARD	ONE NSBC CENTER HSBC	BUFFALO NY 14203
T	SOMMER, MARY B	ONE NSBC CENTER	BUFFALO NY 14203
SD	TOOHEY, PHILIP S	ONE MARINE MIDLAND CENTER HSBC	BUFFALO NY 14203
AS	KUJAWA, HELEN	ONE HSBC CENTER	BUFFALO NY 14203
T	SIMPSON, JOSEPH R.	ONE HSBC CENTER	BUFFALO, NY 14203

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

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

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

01 NOV 14 AM 8:48

SECRETARY OF STATE
TALLAHASSEE FLORIDA



CR2E040 (8/01)



292

November 2, 2001

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
409 East Gaines Street
Tallahassee, FL 32399

Re: TPBC Acquisition Corp.
Document #S36426

Dear Sir/Madam:

Enclosed herewith is an Application for Reinstatement of TPBC Acquisition Corp. (the "Corporation"), along with a check for payment of the associated fees. Please be advised that the annual report was not filed by the due date because it was never received. We respectfully request that the corporation be reinstated. Please forward proof of reinstatement to me at One HSBC Center, 27th Floor, Buffalo, New York 14203.

Please contact me if you have any questions. Thank you for your assistance in this regard.

Sincerely,

A handwritten signature in cursive script that reads "Helen Kujawa".

Helen Kujawa
Assistant Secretary
716-841-5191

Enclosures