

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90167 022 ***158.75

UNIT 29 A1

DOCUMENT # G79652

1. Entity Name
E.C. DRIVER & ASSOCIATES, INC.

Principal Place of Business 7119 BEECH RIDGE TRAIL TALLAHASSEE FL 32312-0609	Mailing Address 100 CALIFORNIA ST #500 SAN FRANCISCO CA 94111 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-2375705

Applied For
 Not Applicable

Zip Country

Zip Country

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

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	VP BLOOM, MARVIN J ONE PENN PLAZA, STE 610 NEW YORK NY 10119	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLER, HUGH 3676 HARTSFIELD RD. TALLAHASSEE FL 32308	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ECHAGARRUA, MARIO 7119 BEECH RIDGE TRAIL TALLAHASSEE FL 32312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENSTEIN, IRWIN L ONE PENN PLAZA, STE 610 NEW YORK NY 10119	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOFFEL, MARTIN M 100 CALIFORNIA ST #500 SAN FRANCISCO CA 94111	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/EO/CFO AINSWORTH, KENT P. 100 CALIFORNIA ST., STE 500 SAN FRANCISCO, CA 94111	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

(continued)

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: *Carol Braummerstedt* **SECRETARY** **2.6.02** **415.774.2700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment
DOCUMENT # G79652

741579

11. OFFICERS & DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS & DIRECTORS IN 11.	
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	1.1 Title 1.2 Name 1.3 Street Address 1.4 City-State-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BRUMMERSTEDT, CAROL 100 CALIFORNIA ST., STE 500 SAN FRANCISCO, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	2.1 Title 2.2 Name 2.3 Street Address 2.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition GALLEN, ROBERT M. 7650 W Courtney Campbell Cswy Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	3.1 Title 3.2 Name 3.3 Street Address 3.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MASTERS, JOSEPH 100 California St., Ste. 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	4.1 Title 4.2 Name 4.3 Street Address 4.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PHILLIPS, JAMES 7119 Beech Ridge Trail Tallahassee, FL 32312
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	5.1 Title 5.2 Name 5.3 Street Address 5.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PEDALINO, PETER One Mack Centre Drive Paramus, NJ 07652
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	6.1 Title 6.2 Name 6.3 Street Address 6.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	7.1 Title 7.2 Name 7.3 Street Address 7.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	8.1 Title 8.2 Name 8.3 Street Address 8.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	9.1 Title 9.2 Name 9.3 Street Address 9.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	10.1 Title 10.2 Name 10.3 Street Address 10.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	11.1 Title 11.2 Name 11.3 Street Address 11.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	12.1 Title 12.2 Name 12.3 Street Address 12.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition