

FILED

JAN 22 2008

STATE TREASURER

Mail to: PO Box 308  
Trenton, NJ 08646

STATE OF NEW JERSEY  
DIVISION OF REVENUE

*Yp*

**"FEE REQUIRED" PUBLIC RECORDS FILING FOR NEW BUSINESS ENTITY** 010098888

Fill out all information below INCLUDING INFORMATION FOR ITEM 11, and sign in the space provided. Please note that once filed, form constitutes your original certificate of incorporation/formation/registration/authority, and the information contained in the filed form considered public. Refer to the instructions for delivery/return options, filing fees and field-by-field requirements. Remember to remit appropriate fee amount. Use attachments if more space is required for any field, or if you wish to add articles for the public record.

1. Business Name: GREGG F. CLYNE MEMORIAL FOUNDATION, INC. 26-1718867

2. Type of Business Entity: NP  
(See instructions for Codes, Page 21, item 2)  
Title 15A Non-Profit Corp.

3. Business Purpose:  
(See instructions, Page 22, item 3)  
SEE ATTACHED.

4. Stock (Domestic Corporations only; LLCs and Non-Profit leave blank):

5. Duration (if indefinite or Perpetual, leave blank):

6. State of Formation/Incorporation (Foreign Entities Only):

7. Date of Formation/Incorporation (Foreign Entities Only):

8. Contact Information:  
Registered Agent Name: GEORGE W. CLYNE

Registered Office: (Must be a New Jersey street address)	Main Business or Principal Business Address:
Street <u>567 LAWRENCE AVENUE</u>	Street <u>567 LAWRENCE AVE.</u>
City <u>WESTFIELD</u> Zip <u>07080</u>	City <u>WESTFIELD</u> State <u>NJ</u> Zip <u>07080</u>

9. Management (Domestic Corporations and Limited Partnerships Only)

- For-Profit and Professional Corporations list Initial Board of Directors, minimum of 1
- Domestic Non-Profits list Board of Trustees, minimum of 3
- Limited Partnerships list all General Partners

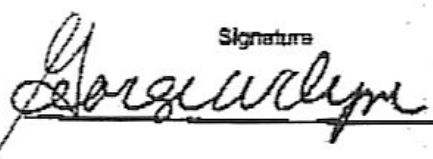
Name	Street Address	City	State	Zip
<u>RITA PAPALEO</u>	<u>31 FERNWOOD TERRACE</u>	<u>NUTLEY</u>	<u>NJ</u>	<u>07110</u>
<u>MARY ANN CLYNE</u>	<u>567 LAWRENCE AVENUE</u>	<u>WESTFIELD</u>	<u>NJ</u>	<u>07090</u>
<u>GEORGE W. CLYNE</u>	<u>567 LAWRENCE AVENUE</u>	<u>WESTFIELD</u>	<u>NJ</u>	<u>07090</u>

The signatures below certify that the business entity has complied with all applicable filing requirements pursuant to the laws of the State of New Jersey.

10. Incorporators (Domestic Corporations Only, minimum of 1)

Name	Street Address	City	State	Zip
<u>GEORGE W. CLYNE</u>	<u>567 LAWRENCE AVENUE</u>	<u>WESTFIELD</u>	<u>NJ</u>	<u>07090</u>

Signature(s) for the Public Record (See instructions for information on Signature Requirements)

Signature 	Name <u>GEORGE W. CLYNE</u>	Title <u>BOARD OF DIRECTORS, VC</u> <u>VICE PRESIDENT OPERATIONS, ADMIN</u>	Date <u>1/16/08</u>
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