

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90051 012 ***150.00

DOCUMENT # 241124

1. Entity Name

GENERAL REALTY & INVESTMENT CO., INC.

Principal Place of Business

**3 CABOT ROAD
 ANDOVER MA 01810-1701
 US**

Mailing Address

**3 CABOT ROAD
 ANDOVER MA 01810-1701
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-0941809**

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

**WOOTEN, MARION M
 5020 BAYSHORE BLVD #105
 SUITE 105
 TAMPA FL 33611**

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.

**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

TITLE **PD** Delete
 NAME **ROUNTREE, CARTER W**
 STREET ADDRESS **3 CABOT ROAD**
 CITY-ST-ZIP **ANDOVER MA 01810-1701**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **C** Delete
 NAME **WOOTEN, MARION M**
 STREET ADDRESS **5020 BAYSHORE BLVD.**
 CITY-ST-ZIP **TAMPA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** Delete
 NAME **WOOTEN, FRANK M**
 STREET ADDRESS **93 SALEM ST**
 CITY-ST-ZIP **ANDOVER MA**

TITLE Change Addition
 NAME
 STREET ADDRESS **1970 Commonwealth Ave, #14**
 CITY-ST-ZIP **Brighton, MA 02135**

TITLE **VD** Delete
 NAME **WOOTEN III, SIMEON F**
 STREET ADDRESS **196 WEST LAKE DR**
 CITY-ST-ZIP **ANNAPOLIS, MD 00000**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **WOOTEN, E CURRAN**
 STREET ADDRESS **196 WEST LAKE DR**
 CITY-ST-ZIP **ANNAPOLIS, MD 00000**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: Carter Wooten Rountree, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/2000

Date

Daytime Phone #

CR2E034 (10/00)