2001 UNIFORM BUSINESS REPORT	(UBR
DOCUMENT # 389858	

 Entity Name PERLAND REALTY ASSOCIATES, INC. FILED 01 APR 30 AN II: 34 Principal Place of Business Mailing Address 73 MT.WAYTE AVE. 73 MT. WAYTE AVE. SECRETARY OF STATE TALLAHASSEE, FLORIDA Fremingham ma 01701 FRAMINGHAM MA 01702 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-1366992 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT Corporation System THOMAS A. GETZ Street Address (P.O. Box Number is Not Acceptable) 5488 PENNOCK POINT ROAD Jupiter FL 33458 1200 S. Pine Island Road Zip Code Plantation 8. The above named entity submits this statement for the purpose of changing its registered office or registared office or registared of Florida.

AMY BERTELE - Ppnt, or both, in the State of Florida. ASSISTANT SECRETARY SPECIAL (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE TITLE ✓ Addition Delete President & Director ☐ Change VICK, R J NAME NAME Robert Band STREET ADDRESS 5499 BUNKY WAY STREET ADDRESS 19 William J. Heights CITY-ST-ZIP **DUNWOODY GA 30338** CITY-ST-ZIP Framingham, MA 01701 TITLE ☐ Delete TITLE Change ☐ Addition ORTEGA, ROSEMARY NAME NAME STREET ADDRESS 73 MT WAYTE AVE STREET ADDRESS CITY-ST-ZIP FRAMINGHAM MA 01701 CITY-ST-ZIP TITLE TITLE Treasurer & Director ☐ Delete ☐ Change ★ Addition NAME NAME Susan C. Mellace STREET ADDRESS STREET ADDRESS 23 Dirado Drive CITY-ST-ZIP CITY-ST-ZIP <u>Marlboro, MA 01752</u> ☐ Delete TITLE TITLE ☐ Change Addition Director NAME NAME Michael Ciskey STREET ADDRESS STREET ADDRESS 2 Racebrook Drive CITY-ST-ZIP CITY-ST-7JP Bethel, CT 06801 TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS ****150.00 ****150.00 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 attackingent with an address, with all other like empowered.