

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006687

1. Entity Name

CAPREIT OF SUMMER TRACE, INC.

FILED
Jun 27, 2001 8:00 am
Secretary of State

06-27-2001 90167 001 *1,050.00

0443951

75498



DO NOT WRITE IN THIS SPACE

Principal Place of Business
11200 ROCKVILLE PIKE
SUITE 100
ROCKVILLE MD 20852
US

Mailing Address
11200 ROCKVILLE PIKE
SUITE 100
ROCKVILLE MD 20852
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 52-2072838

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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. (See criteria on back) ☐

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	PCED	<input type="checkbox"/> Delete
NAME	KADISH, RICHARD L	
STREET ADDRESS	11200 ROCKVILLE PIKE	
CITY-ST-ZIP	ROCKVILLE MD 20852	
TITLE	VTDC	<input type="checkbox"/> Delete
NAME	ESPOSITO, BRUCE A	
STREET ADDRESS	11200 ROCKVILLE PIKE	
CITY-ST-ZIP	ROCKVILLE MD 20852	
TITLE	AVP	<input checked="" type="checkbox"/> Delete
NAME	SHAPIRO, ROBERT A	
STREET ADDRESS	11200 ROCKVILLE PIKE	
CITY-ST-ZIP	ROCKVILLE MD 20852	
TITLE	VS	<input type="checkbox"/> Delete
NAME	GOLDSHINE, JEFFREY A	
STREET ADDRESS	11200 ROCKVILLE PIKE	
CITY-ST-ZIP	ROCKVILLE MD 20852	
TITLE	VS	<input type="checkbox"/> Delete
NAME	HEYMANN, ERNEST L	
STREET ADDRESS	11200 ROCKVILLE PIKE	
CITY-ST-ZIP	ROCKVILLE MD 20852	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP & Controller	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Eugene H. Goodsell	
STREET ADDRESS	11200 Rockville Pike, Suite 100	
CITY-ST-ZIP	Rockville, MD 20852	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Eugene H. Goodsell Eugene H. Goodsell

6/7/01

301-231-8700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment Doc# F97000006687



75498

June 7, 2001

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Late Filing - CAPREIT of Summer Trace, Inc.

I became very concerned yesterday when I noted that we had not yet filed the 2001 Uniform Business Report which apparently was due May 1. We have two women out on maternity leave and the person who handled this filing last year has left the company. No one was aware this report was due, and thus the filing and payment seems to have fallen through the cracks.

Yesterday, once I noted this report (and UBRs for other corporations in Florida) was late and that there could be a substantial late fee, I immediately called your office to see if there is some way to obtain a waiver of the fee. The individual handling phone inquiries was very helpful and asked that I write a letter explaining the circumstances so that your office could consider waiving the late fee. She asked that we send the letter with the UBR and check for the regular fee.

We realize we are late in filing, but we respectfully request any late fees be waived for this year's filing. Thank you so much for your consideration.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Eugene H. Goodsell".

Eugene H. Goodsell
VP & Controller