

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 24 1997 8:00am  
Secretary of State

DOCUMENT # P96000100573 (0)

1. Corporation Name  
ALLIED/PSM, INC.



Principal Place of Business

Mailing Address

C/O URDANG & ASSOC. REAL ESTATE ADVISORS  
630 WEST GERMANTOWN PIKE, SUITE 321  
PLYMOUTH MEETING PA 19462

C/O URDANG & ASSOC. REAL ESTATE ADVISORS  
630 WEST GERMANTOWN PIKE, SUITE 321  
PLYMOUTH MEETING PA 19462-1074

3. Date Incorporated or Qualified

12/12/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

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4. FEI Number

23-2878798

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person filing this report (delete agent if not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

10 D  
NAME URDANG, E. SCOTT  
STREET ADDRESS 630 WEST GERMANTOWN PIKE, SUITE 321  
CITY-STATE-ZIP PLYMOUTH MEETING PA 19462

11 ☐ DELETE

12 ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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NAME  
STREET ADDRESS  
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE DP ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

15 ☐ Change ☒ Addition

16 TITLE VS

17 NAME Blum, David J

18 STREET ADDRESS 630 W. Germantown Pike, Suite 321

19 CITY-STATE-ZIP Plymouth Meeting, PA 19462

20 ☐ Change ☒ Addition

21 TITLE V

22 NAME Novick, Steven C.

23 STREET ADDRESS 630 W. Germantown Pike, Suite 321

24 CITY-STATE-ZIP Plymouth Meeting, PA 19462

25 ☐ Change ☒ Addition

26 TITLE V

27 NAME Sanfilippo, Vincent

28 STREET ADDRESS 630 W. Germantown Pike, Suite 321

29 CITY-STATE-ZIP Plymouth Meeting, PA 19462

30 ☐ Change ☒ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

35 ☐ Change ☐ Addition

36 TITLE

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134 CITY-STATE-ZIP

135 ☐ Change ☐ Addition

136 TITLE

137 NAME

138 STREET ADDRESS

139 CITY-STATE-ZIP

140 ☐ Change ☐ Addition

SIGNATURE:

*David J. Blum*

David J. Blum

2-24-97

(610) 834-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0011966

CR2E034 (9/96)