Mailing Address

SUITE 321

US

630 W GERMANTOWN PIKE

PLYMOTUH MEETING PA 19462

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000044655 1. Corporation Name

ALLIED/GVHCC, INC.

URDANG & ASSOC REAL ESTATE

Principal Place of Business

PLYMOUTH MEETING PA 19462

SUITE 321

US

Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90049 030 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

						06/24/1993			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		A	oplied For
21	26					23-2753060		N N	ot Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired			Additional
22 27									equired
City & State City & State						6. Election Campaign Financing			May Be
23 28				· · ·		Trust Fund Contribution			to Fees
Zip	Country	Zip	Coun	ıry		8. This corporation owes the curr	ent year into	angible Yes	[X]No
24	25		30			Personal Property Tax.  O. Name and Address of New F	Registered .		<u> </u>
	9. Name and Address of Current	Registered Agent	<del>-  </del>	31 Nam		IO. Haite and Fladicas of ton	togiote-		
C T CORPORATION SYSTEM									
1200 S PINE ISLAND RD				32 Stree	et Address	(P.O. Box Number is Not Accepta	able)		
PLANTATION FL 33324				33				· · · · · · · · · · · · · · · · · · ·	
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
			[1	34 City			FI	85 Zip	Code
44 5	to the provisions of Sections 607.0502	and 607 1509 Florida Statute	e the sh	we-name	ad comoral	tion submits this statement for the	numose of	changing its	s registered
office or re	onistored agent or both, in the State o	of Florida, Such change was at	ithorized	ov the co	rporation's	board of directors. I hereby acce	pt the appoi	ntment as re	egistered
agent. I ai	m familiar with, and accept the obligat	ions of, Section 607.0505, Flor	nda Statut	es.					
SIGNATURE	Signature, typed or printed name of registered agent	and title if englicable (NOTE)	Registered A	nent sinnatu	re required wh	en reinstating)	DATE		<del></del>
12.	OFFICERS ANI		13.	gorn agratu	10 Todanoa Will	ADDITIONS/CHANGES TO OF		ID DIRECTO	ORS IN 12
TITLE	PD	□ DELETE	1.1 TITL	E	DP			Change	Addition
NAME	URDANG, SCOTT E		1.2 NAM			SCOTT.			
STREET ADDRESS	The same and the same as a same as a			1.3 STREET ADDRESS					
	PLYMOUTH PA					462			
CITY-ST-ZIP	VS	□ DELETE		TITLE				☐ Change	
NAME	BLUM, DAVID J		22 NAN	22 NAME					
STREET ADDRESS	630 W GERMANTOWN PIKE SU	IITE 321	2.3 STR	EET ADDRES	ss				
CITY-ST-ZIP	PLYMOUTH MEETING PA	AIL OLI		Y-ST-ZIP		462			
TITLE	V DELETE			3.1 TITLE				Change	Z Addition
NAME	SANFILIPPO, VINCENT			3.2 NAME			سد ز دده	-	•
STREET ADDRESS	630 W GERMANTOWN PIKE SU	IITE 321		EET ADDRES	ss				
	PLYMOUTH MEETING PA			Y-ST-ZIP		462			
CITY-ST-ZIP TITLE	V DELETE		_	4.1 TITLE				Change	XAddition
NAME	NOVICK, STEVEN C		4. 2 NA						
STREET ADDRESS	630 W GERMANTOWN PIKE SL	IITF 321		EET ADDRES	ss				
CITY-ST-ZIP	PLYMOUTH MEETING PA	7110 701		/-ST-ZiP	· I	462-			
TITLE	1 LIMOUII INCLINIO I I	☐ DELETE	5.1 TITL		<del> </del>			Change	<b></b> Addition
NAME			5.2 NAA						
STREET ADDRESS			5.3 STR	EET ADDRES	ss				
CITY-ST-ZIP			5.4 CIT	-ST-ZIP					
TITLE		☐ DELETE	6.1 TITL	Ē	-+			Change	Addition
NAME			6.2 NAM	1E					
STREET ADDRESS			6.3 STR	EET ADORE	ss				
CITY-ST-ZIP			6.4 C/IT	-ST-ZIP					
Ψ111-01-ΔIF			. 44	ntion sto	tod in Soci	tion 119.07(3)(i), Florida Statutes.	I further cer	tifu that the	information

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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)