## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT#**

P93000044655

1. Entity Name ALLIED/GVHCC, INC.



## **FILED** Mar 25, 2003 8:00 am Secretary of State 03-25-2003 90067 043 \*\*\*150.00

					W GW							
Principal Place of Business URDANG & ASSOC REAL ESTATE SUITE 321 PLYMOUTH MEETING PA 19462 US		Mailing Address 630 W GERMANTOWN PIKE SUITE 321 PLYMOTUH MEETING PA 19462 US										
2. Principal Place of Business		3. Mailing Address								,, <b>2</b> (12) 211 122		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State			City & State				4. FEI Number 23-2753060				Applied For Not Applicable	e
Zip	Country	Zip Co		Coun	ountry					\$8.75 Additional Fee Required		
······································	6. Name and Address of Current F	Registere	•				7. Name and Address of New Registered Agent					]
O T CORROBATION SYSTEM							772	رويرهم يوسف يهي ادام عدايد				
C T CORPORATION SYSTEM 1200 S PINE ISLAND RD						ddress (F	P.O. Bo	x Number is Not Acceptable)				٦
PLANTATION FL 33324												$\dashv$
PLANTATION PL 33324										T = -		4
					City				FL	Zip Co	de	
	named entity submits this statement for	the purp	ose of changing its re	gistere	d office or	registere	ed age	nt, or both, in the State of Flor	ida. I am fa	miliar with	and accept	
the obligat	ions of registered agent.								•			
SIGNATURE .	Signature, typed or printed name of registered agent an	4491- 3	Contract MOTE F	N==1=4===					DATE		·	
		ю ше я арр	iicabie. (NOTE. F	reflezierer	d Agent signatu	ira reduitad i	whenrem		DAIL	· · · .		$\dashv$
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of			tate				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.					
10.	OFFICERS AND D		RS	11.	<del> </del>		ADD	DITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	RS IN 11	$\dashv$
TITLE	DP		☐ Delete 1							☐ Change	Addition	
NAME	URDANG, E. SCOTT	F 004		NAME								707
STREET ADDRESS CITY-ST-ZIP PLYMOUTH PA 19462					ET ADDRESS ST-ZIP							2
TITLE	VS		☐ Delete	TITLE						☐ Change	Addition	<u> </u>
NAME	BLUM, DAVID J		Fm Delete	NAME						vgv		1
STREET ADDRESS	630 W GERMANTOWN PIKE SUIT	E 321	-		ET ADDRESS							
CITY-ST-ZIP	PLYMOUTH MEETING PA 19462			CITY-	ST-ZIP							4
TITLE	V CANEILIDDO MAÑOENT		☐ Delete	TITLE NAME				e e e	- ·	Change.	. Addition	
NAME STREET ADDRESS	SANFILIPPO, VINCENT 630 W GERMANTOWN PIKE SUIT	F 321			ET ADDRESS							
CITY-ST-ZIP	PLYMOUTH MEETING PA 19462				ST-ZIP							
TITLE	D		☐ Delete	TITLE						☐ Change	. 🔲 Addition	7
NAMÉ	FERST, RICHARD J	E 201		NAME	1							
STREET ADDRESS CITY-ST-ZIP	630 W GERMANTOWN PIKE SUITI PLYMOUTH MEETING PA 19462	C 321			T ADDRESS ST-ZIP							
TITLE	V TETRIOUTT MEETING 17 19402		☐ Delete	TITLE						☐ Change	Addition	-
NAME	GRECO, MARK B		□ osiete	NAME						onange 		
STREET ADDRESS	630 WEST GERMANTOWN PIKE,	SUITE 3	21		T ADDRESS							
CITY-ST-ZIP	PLYMOUTH MEETING PA 19462			CITY-	ST-ZIP							

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

☐ Delete

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

3-20-02

Change

Addition