

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 05, 2001 8:00 am**
Secretary of State

05-05-2001 90825 045 ***150.00

DOCUMENT # 404288

1. Entity Name

ORIOLE G & T MANAGEMENT CORP.

Principal Place of Business

**1690 SOUTH CONGRESS AVE.
SUITE 200
DELRAY BEACH FL 33445**

Mailing Address

**1690 SOUTH CONGRESS AVE.
SUITE 200
DELRAY BEACH FL 33445**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1440660**

Applied For

Not Applicable

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

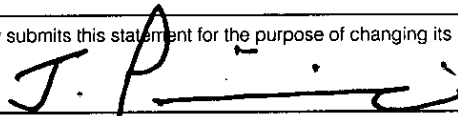
**LEVY, RICHARD D
1690 S CONGRESS AVE
SUITE 200
DELRAY BCH FL 33445**Name **Pivinski, Joseph**~~C/O Oriole Homes Corp.~~
Street Address (P.O. Box Number is Not Acceptable)**1690 S Congress Avenue, STE 200**

City

Delray Beach**FL**Zip Code
33445

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

**J. Pivinski****4/25/01**

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

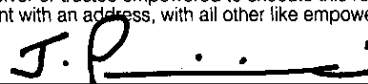
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D			
	LEVY, R.D.	1690 S CONGRESS AVE	DELRAY BCH FL	
	VT			
	PIVINSKI, JOSEPH	1690 S CONGRESS AVE 200	DELRAY BCH FL 33445	
	V			
	D'ADDARIO, MERLE	1690 S CONGRESS AVE	DELRAY BCH FL	
	PD			
	LEVY, MARK A.	1690 S CONGRESS AVE	DELRAY BCH FL	
	AS			
	LEVY, JO ANN	1690 S CONGRESS AVE	DELRAY BCH FL	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:

**J. Pivinski****3/26/2001****561-274-2000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)