

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 07, 1999 8:00 am**  
**Secretary of State**

04-07-1999 90049 001 \*\*\*150.00

**DOCUMENT # 821528**

1. Corporation Name  
**U.C. REALTY CORP.**

Principal Place of Business  
**% 1600 VALLEY ROAD  
WAYNE NJ 07470**

Mailing Address  
**% 1600 VALLEY ROAD  
WAYNE NJ 07470**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/31/1968**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For  
Not Applicable

**13-2611691**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

Zip

Country

Zip

Country

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE FL 32301**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE  
NAME **REED, J. M.**  
STREET ADDRESS **1600 VALLEY ROAD**  
CITY-ST-ZIP **WAYNE, NJ 0**

1.1 TITLE **Vice President** ☒ Change ☐ Addition  
1.2 NAME **Alderman, J.D.**  
1.3 STREET ADDRESS **94 D Main Street**  
1.4 CITY-ST-ZIP **Hilton Rd Isl., SC 29926**

TITLE **VD** ☐ DELETE  
NAME **SOUTENDIJK, DR**  
STREET ADDRESS **1600 VALLEY ROAD**  
CITY-ST-ZIP **WAYNE NJ**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **AT** ☒ DELETE  
NAME **MCWILLIAMS, KG**  
STREET ADDRESS **1600 VALLEY ROAD**  
CITY-ST-ZIP **WAYNE NJ**

3.1 TITLE **Vice President** ☒ Change ☐ Addition  
3.2 NAME **Lattimore, W. Jr.**  
3.3 STREET ADDRESS **1 Skidaway Village Walk**  
3.4 CITY-ST-ZIP **Savannah, GA 31411**

TITLE **VPD** ☐ DELETE  
NAME **ALBERT, J.C.**  
STREET ADDRESS **WEST LATHROP AVENUE**  
CITY-ST-ZIP **SAVANNAH GA**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **T** ☒ DELETE  
NAME **BARNEY, D.W.**  
STREET ADDRESS **1600 VALLEY RD**  
CITY-ST-ZIP **WAYNE NJ**

5.1 TITLE **Vice President** ☒ Change ☐ Addition  
5.2 NAME **Arnold, A.W.**  
5.3 STREET ADDRESS **200 Jensen Road**  
5.4 CITY-ST-ZIP **Prattville, AL 36067**

TITLE **S** ☐ DELETE  
NAME **ELLIOTT, M.B.**  
STREET ADDRESS **1600 VALLEY ROAD**  
CITY-ST-ZIP **WAYNE NJ**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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

SIGNATURE: *Mary Beth Elliott* **Mary Beth Elliott**

Secretary

**3/30/99 (973) 628-2000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0564346