

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000003959

1. Entity Name

CBIZ PROPERTY TAX SOLUTIONS, INC.

FILED

Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90359 024 ***150.00

Principal Place of Business

Mailing Address

6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CLEVELAND OH 44131

6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CLEVELAND OH 44131

924426



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

5215 EAST 71 ST STREET

Suite, Apt. #, etc.

SUITE 1000

City & State

TULSA, OK

Zip

74136

Country

Zip

Country

4. FEI Number

34-1877119

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

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

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 P ☐ Delete
NAME ROSEMONT, ROBERT N
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CITY-ST-ZIP CLEVELAND OH 44131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME GRISKO, JEROME P JR.
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CITY-ST-ZIP CLEVELAND OH 44131

TITLE EV ☒ Change ☐ Addition
NAME JEROME P. GRISKO, JR.
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME HAWN, ROGER P
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CITY-ST-ZIP CLEVELAND OH 44131

TITLE V ☒ Change ☐ Addition
NAME ROGER P. HAWN
STREET ADDRESS 5215 EAST 71st STREET, STE. 1000
CITY-ST-ZIP TULSA, OK 74136

TITLE V ☐ Delete
NAME ROSEMONT, ROBERT S
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CITY-ST-ZIP CLEVELAND OH 44131

TITLE V ☒ Change ☐ Addition
NAME ROBERT S. ROSEMONT
STREET ADDRESS 5215 EAST 71st STREET, STE. 1000
CITY-ST-ZIP TULSA, OK 74136

TITLE V ☐ Delete
NAME MCCULLOUGH, CHARLOTTE
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CITY-ST-ZIP CLEVELAND OH 44131

TITLE V ☒ Change ☐ Addition
NAME CHARLOTTE MCCULLOUGH
STREET ADDRESS 5215 EAST 71st STREET, STE. 1000
CITY-ST-ZIP TULSA, OK 74136

TITLE T ☐ Delete
NAME AZZOLINA, DAVID S
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330
CITY-ST-ZIP CLEVELAND OH 44131

TITLE S ☐ Change ☒ Addition
NAME BARBARA A. RUTIGLIANO
STREET ADDRESS 6480 ROCKSIDE WOODS BLVD.S. STE. 330
CITY-ST-ZIP INDEPENDENCE, OH 44131

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)