**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 31, 2002 8:00 am F00000003959 DOCUMENT # **Secretary of State** 1. Entity Name 01-31-2002 90106 001 \*\*\*750.00 CBIZ PROPERTY TAX SOLUTIONS, INC. Principal Place of Business Mailing Address 5215 EAST 71ST STREET 6480 ROCKSIDE WOODS BLVD., SOUTH, #330 11364 STE 1000 CLEVELAND OH 44131 **TULSA OK 74136** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 34-1877119 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (9/01) TITLE Change ☐ Addition TITLE □ Delete NAME ROSEMONT, ROBERT N NAME 6480 ROCKSIDE WOODS BLVD., SOUTH, #330 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLEVELAND OH 44131 CITY-ST-ZIP TITLE **EVP** ☐ Delete TITLE Change ☐ Addition NAME GRISKO, JEROME P JR. 6480 ROCKSIDE WOODS BLVD., SOUTH, #330 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CLEVELAND OH 44131** TITLE TITLE Change XX Addition XX Delete HAWN, ROGER P NAME NAME Michael W. Gleespen STREET ADDRESS **5215 EAST 71ST STREET STE 1000** STREET ADDRESS 6480 Rockside Woods Blvd., Suite 330 CITY-ST-ZIP CITY-ST-ZIP **TULSA OK 74136** Cleveland, OH 44131 X Delete TITLE ☐ Change ☐ Addition TITLE ROSEMONT, ROBERT S NAME NAME STREET ADDRESS STREET ADDRESS 5215 EAST 71ST STREET STE 1000 CITY-ST-ZIP **TULSA OK 74136** CITY-ST-ZIP TITL F ☐ Delete TITLE ☐ Change Addition NAME MCCULLOUGH, CHARLOTTE NAME STREET ADDRESS STREET ADDRESS 5215 EAST 71ST STREET STE 1000 CITY-ST-ZIP **TULSA OK 74136** CITY-ST-ZIP TITLE Delete TITLE Change Addition AZZOLINA, DAVID S NAME NAME STREET ADDRESS 6480 ROCKSIDE WOODS BLVD., SOUTH, #330 STREET ADDRESS CITY-ST-ZIP **CLEVELAND OH 44131** CITY-ST-ZIP 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

SIGNATURE:

changed, or on an attachment with

HRED Michael W.

Daytime Phone #