

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000005951

1. Entity Name
FELNER REALTY CORP.



FILED

03 APR 16 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business
600 CENTRAL AVENUE, SUITE 365
HIGHLAND PARK IL 60035

Mailing Address
600 CENTRAL AVENUE, SUITE 365
HIGHLAND PARK IL 60035

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number 88-0432583
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

FELNER, JAY
4182 LIVE OAK BOULEVARD
DELRAY BEACH FL 33445

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME FELNER, JAY
STREET ADDRESS 4182 LIVE OAK BLVD.
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VSD
NAME GOLDMAN, ROBERT U
STREET ADDRESS 600 CENTRAL AVENUE, SUITE 365
CITY-ST-ZIP HIGHLAND PARK IL 60035

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME WAGNER, NATHAN
STREET ADDRESS 600 CENTRAL AVENUE, SUITE 365
CITY-ST-ZIP HIGHLAND PARK IL 60035

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE FELNER, JAY
NAME 4182 LIVE OAK BLVD.
STREET ADDRESS DELRAY BEACH FL 33445
CITY-ST-ZIP VSD

TITLE
NAME
STREET ADDRESS
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 another like empowered.

SIGNATURE TO Robert U. Goldman 3/25/03 (847) 432-3666
600 CENTRAL AVENUE, SUITE 365
HIGHLAND PARK, ILLINOIS 60035

0650567 AT

0650567 AT

CR2E034 (10/02)