

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000001192

1. Entity Name

REAL PROPERTY SERVICES CORP., A DELAWARE CORPORA

Principal Place of Business

Mailing Address

818 W. BROOKS AVENUE  
NORTH LAS VEGAS NV 89030  
US

818 W. BROOKS AVENUE  
NORTH LAS VEGAS NV 89030  
US

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 95-3562968

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

SCHAEFFER, NEIL  
8452 GARDENS CIR #4  
SARASOTA FL 34243

Name

Neil Schaeffer

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

243 North Shore Drive

City

Osprey

FL

Zip Code  
34229

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

TITLE PTD  
NAME BIRD, ALLAN S ☐ Delete  
STREET ADDRESS 818 W. BROOKS AVENUE  
CITY-ST-ZIP NORTH LAS VEGAS NV 89030

TITLE VS  
NAME GREEN, PATRICIA M ☒ Delete  
STREET ADDRESS 818 W. BROOKS AVE  
CITY-ST-ZIP NORTH LAS VEGAS NV 89030

TITLE DV  
NAME BIRD, JOSHUA D ☐ Delete  
STREET ADDRESS 818 W. BROOKS AVENUE  
CITY-ST-ZIP NORTH LAS VEGAS NV 89030

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE Vice President/Secretary ☒ Change ☐ Addition  
NAME James D. Salo  
STREET ADDRESS 818 W. Brooks Avenue  
CITY-ST-ZIP North Las Vegas, Nevada 89030

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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

01/09/01

Date

(702) 315-5195

Daytime Phone #

CR2E034 (10/00)

0801773

FILED  
Jan 22, 2001 8:00 am  
Secretary of State

01-22-2001 90060 001 \*\*\*793.75



DO NOT WRITE IN THIS SPACE