

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000002087

1. Entity Name

CITADEL FINANCIAL GROUP, INC.

FILED

Jan 28, 2000 8:00 am  
Secretary of State

01-28-2000 90145 045 \*\*\*150.00

Principal Place of Business

Mailing Address

3001 LINCOLN DR W  
STE B  
MARLTON NJ 08053  
US

3001 LINCOLN DR W  
STE B  
MARLTON NJ 08053-1528  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-1641505

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TOBER, JOHN E  
1404 BRICKELL AVE  
SUITE 340  
MIAMI FL 33131

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, 2000 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 DCP  
NAME GORENBERG, CHARLES L  
STREET ADDRESS 3001 LINCOLN DR W, STE B  
CITY-ST-ZIP MARLTON NJ 08053 ☐ Delete

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

TITLE DVCT  
NAME FRANK, SEYMOUR  
STREET ADDRESS 3001 LINCOLN DR W, STE B  
CITY-ST-ZIP MARLTON NJ 08053 ☐ Delete

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

TITLE DS  
NAME BREYLEY, RICHARD  
STREET ADDRESS 75 HADDON AVE, SUITE 100  
CITY-ST-ZIP HADDONFIELD NJ ☐ Delete

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ZIP-CODE 08033

TITLE D  
NAME MCGANN, DENISE  
STREET ADDRESS 49 DI'S COURT  
CITY-ST-ZIP SEWELL NJ ☐ Delete

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ZIP-CODE 08080

TITLE D  
NAME FISCHER, JOHN J  
STREET ADDRESS 3226 COTTMAN AVE  
CITY-ST-ZIP PHILADELPHIA PA ☐ Delete

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ZIP-CODE 19149

TITLE ☐ Delete  
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:

*Charles Gorenberg*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1/24/00

(856) 988-0480

Date

Daytime Phone #

Charles Gorenberg

CR2E034 (9/99)