

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000004593

1. Entity Name

GLIMCHER PROPERTIES CORPORATION

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91574 015 ***150.00

A0069586



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

20 S. THIRD ST
COLUMBUS OH 43215
US

20 S. THIRD ST
COLUMBUS OH 43215
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 31-1393472

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

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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 D ☐ Delete
NAME GEE, GORDON
STREET ADDRESS OFFICE OF THE PRESIDENT-BROWN UNIVERSITY
CITY-ST-ZIP PROVIDENCE RI 02912-1860

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

TITLE D ☐ Delete
NAME BARACH, PHILIP
STREET ADDRESS 9403 KENWOOD DR,STE D-100
CITY-ST-ZIP CINCINNATI OH 45242

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

TITLE CEO ☐ Delete
NAME GLIMCHER, HERBERT
STREET ADDRESS 10 N DREXEL AVENUE
CITY-ST-ZIP COLUMBUS OH 43209

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

TITLE V ☐ Delete
NAME HARMANIS, GEORGE M
STREET ADDRESS 3640 BOATHOUSE DRIVE
CITY-ST-ZIP HILLIARD OH 43026

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

TITLE VCFO ☐ Delete
NAME CORNELLY, WILLIAM G
STREET ADDRESS 215 WOODEDGE CIRCLE WEST
CITY-ST-ZIP POWELL OH 43065

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

TITLE D ☐ Delete
NAME WEINBERG, HARVEY
STREET ADDRESS 164 TIMBER LANE
CITY-ST-ZIP GLENCOE IL 60022

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.

George M. Harmanis

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP/Controller

4/27/01

Date

(614) 621-9800

Daytime Phone #

CR2E034 (10/00)