

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003801

1. Entity Name

ORA REALTY, INC.

**FILED**  
**Feb 23, 2001 8:00 am**  
**Secretary of State**

02-12-2001 90251 034 \*\*\*150.00

Principal Place of Business  
2400 CRESTMOOR RD.  
NASHVILLE TN 37215

Mailing Address  
2400 CRESTMOOR RD.  
NASHVILLE TN 37215

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 62-1657669

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

CRARY, LAWRENCE E III  
555 COLORADO AVENUE, SUITE 1  
STUART FL 34994

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

TITLE P/D  
NAME HENDERSON, E. RANDALL JR  
STREET ADDRESS 2400 CRESTMOOR RD.  
CITY-ST-ZIP NASHVILLE TN 37215 ☐ Delete

TITLE S  
NAME PETTY, RONALD  
STREET ADDRESS 2400 CRESTMOOR RD.  
CITY-ST-ZIP NASHVILLE TN 37215 ☐ Delete

TITLE D  
NAME GROSS, SHELDON  
STREET ADDRESS 2400 CRESTMOOR RD.  
CITY-ST-ZIP NASHVILLE TN 37215 ☐ Delete

TITLE C/D  
NAME SCHOELLHOM, ROBERT A  
STREET ADDRESS C/O BRYAN & GROSS 40 SKOKIE BLVD., STE 450  
CITY-ST-ZIP NORTHBROOK IL 60062 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

*Ronald W. Petty*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-7-00 615-244-5237

CR2E034 (10/00)