

2000 UNIFORM BUSINESS REPORT (UBR)

000662

DOCUMENT # F97000005042

1. Entity Name

THE PRICE REIT, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 17 AM 9:51

Principal Place of Business

Mailing Address

3333 NEW HYDE PARK ROAD
PO BOX 5020
NEW HYDE PARK NY 11042-0020

3333 NEW HYDE PARK ROAD
PO BOX 5020
NEW HYDE PARK NY 11042-0020

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-1746059

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 CFO
NAME PAPPAGALLO, MIKE
STREET ADDRESS 3333 NEW HYDE PARK RD
CITY-ST-ZIP NEW HYDE PARK NY 11042

☐ Delete

TITLE VP
NAME KORNWASSER, JOSEPH K
STREET ADDRESS 145 S. FAIRFAX AVENUE, 4TH FLOOR
CITY-ST-ZIP LOS ANGELES CA 90036

☐ Delete

TITLE P
NAME FLYNN, MIKE
STREET ADDRESS 3333 NEW HYDE PARK RD
CITY-ST-ZIP NEW HYDE PARK NY 11042-0020

☐ Delete

TITLE EV
NAME KRONENBERG, LAWRENCE
STREET ADDRESS 145 S. FAIRFAX AVENUE, 4TH FLOOR
CITY-ST-ZIP LOS ANGELES CA 90036

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

6000003144726--5
-02/23/00--01064--003
***2467.75 ***150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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)(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

Mike Pappagallo

Date

Daytime Phone #

2/7/00

(516) 869-7238

CR2E034 (9/99)