**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 04, 2001 8:00 am Secretary of State DOCUMENT # F9800005971 1. Entity Name GRT VIII, INC. 05-04-2001 90143 003 \*\*\*150.00 Principal Place of Business Mailing Address 400 S. EL CAMINO REAL. #1100 400 S. EL CAMINO REAL. #1100 SAN MATEO CA 94402-1708 SAN MATEO CA 94402-1708 B0047398 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 94-3311279 Not Applicable Zip Zio Country Country \$8.75 Additional Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T\_CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00 Change Addition TITLE ☐ Delete TITI F BATINOVICH, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 400 S. EL CAMINO REAL, #1100 CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA 94402-1708 Change ■ Addition TITLE ☐ Delete TITLE BATINOVICH, ANDREW NAME NAME STREET ADDRESS STREET ADDRESS 400 S. EL CAMINO REAL, #1100 CITY-ST-7IP CITY-ST-ZIP SAN MATEO CA 94402-1708 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME DALY-EUGENE ===== NAME STREET ADDRESS STREET ADDRESS 555 LAUREL ST., PENTHOUSE #608 CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA 94401 TITLE ☐ Channe Addition ☐ Delete TITLE SHAPIRO, ALAN NAME NAME STREET ADDRESS STREET ADDRESS 400 S. EL CAMINO REAL, #1100 CITY-ST-7IP CITY-ST-ZIP SAN MATEO CA 94402-1708 ☐ Change Addition TITLE ☐ Defete TITLE AUSTIN, FRANK E NAME NAME STREET ADDRESS 400 S. EL CAMINO REAL, #1100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA 94402-1708 TITLE ☐X Delete TITLE **EVCCFOAS** ★ Change ☐ Addition NAME GARNICK, TERRI NAME Stephen R. Saul STREET ADDRESS 400 S. EL CAMINO REAL, #1100 STREET ADDRESS 312 Melrose Avenue CITY-ST-ZIP 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 SAN MATEO CA 94402-1708

Frank E. Austin, Secretary 4/23/01 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

with all other like empowered.

changed, or on an attachment with an address

SIGNATURE:

(650) 343–9300 Daytime Phone #