

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000005937

1. Entity Name

CIRCLE HOUSING CORPORATION

Principal Place of Business

8 Campus Drive, 4th Floor
Parsippany, NJ 07054

Mailing Address

8 Campus Drive, 4th Floor
Parsippany, NJ 07054

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

22-3496517

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent

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 President / Director ☐ Delete

NAME Joel W. Stoesser
STREET ADDRESS 8 Campus Drive, 4th Floor
CITY-ST-ZIP Parsippany, NJ 07054

TITLE Vice President// Director ☐ Delete

NAME John W. Dark
STREET ADDRESS Two Ravina Drive, Suite 1400
CITY-ST-ZIP Atlanta, GA 30346

TITLE Vice President ☐ Delete

NAME Noah Levy
STREET ADDRESS Two Ravina Drive, Suite 1400
CITY-ST-ZIP Atlanta, GA 30346

TITLE Treasurer ☐ Delete

NAME Bernadette Coyle
STREET ADDRESS 8 Campus Drive, 4th Floor
CITY-ST-ZIP Parsippany, NJ 07054

TITLE Secretary ☐ Delete

NAME Ellen T. Kendall
STREET ADDRESS 8 Campus Drive, 4th Floor
CITY-ST-ZIP Parsippany, NJ 07054

TITLE Director ☐ Delete

NAME Victor Del Pizzo
STREET ADDRESS 8 Campus Drive, 4th Floor
CITY-ST-ZIP Parsippany, NJ 07054

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

Ellen T. Kendall

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELLEN T. KENDALL, SECRETARY

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90049 033 ***150.00

A0054968

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)

4/16/01

Date

973-683-1096

Daytime Phone #