

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006110

1. Entity Name

LMRES REAL ESTATE ADVISERS, INC.

Principal Place of Business

259 NORTH RADNOR-CHESTER ROAD, SUITE 200  
RADNOR PA 19087

Mailing Address

259 NORTH RADNOR-CHESTER ROAD, SUITE 200  
RADNOR PA 19087

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

23-1695311

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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 \$550.00

After SEPTEMBER 13, 2000 Min. will be \$750.00  
Make Check Payable to Department of State

10. Election Campaign Financing

\$5.00 May Be Added to Fees ☐

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME CALLANTINE, DOUGLAS S  
STREET ADDRESS 1735 MARKET STREET, 12TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103-7501 ☐ Delete

TITLE  
NAME 400003417574-1  
STREET ADDRESS -10/06/00--01124--004  
CITY-ST-ZIP \*\*\*\*\*550.00 \*\*\*\*\*550.00 ☐ Change ☐ Addition

TITLE V  
NAME LAYMAN, RICHARD K  
STREET ADDRESS 1735 MARKET STREET, 12TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103-7501 ☐ Delete

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

TITLE AS  
NAME RANDOLPH, JOHN S JR.  
STREET ADDRESS 259 NORTH RADNOR-CHESTER ROAD, SUITE 200  
CITY-ST-ZIP RADNOR PA 19087 ☐ Delete

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

TITLE T  
NAME MCPAUL, MICHAEL  
STREET ADDRESS 1735 MARKET STREET, 12TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103-7501 ☐ Delete

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

TITLE D  
NAME D'ALESSIO, M. WALTER  
STREET ADDRESS 1735 MARKET STREET, 12TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103-7501 ☐ Delete

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

TITLE D  
NAME BUTCHENHART, R. CRAIG  
STREET ADDRESS 1735 MARKET STREET, 12TH FLOOR  
CITY-ST-ZIP PHILADELPHIA PA 19103-7501 ☐ Delete

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)(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

Date

Daytime Phone #

APPROVED  
AND  
FILED

00 SEP 28 AM 9:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)