

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006459

1. Entity Name

CARR REAL ESTATE SERVICES, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90004 013 \*\*\*150.00

Principal Place of Business

1850 K STREET, N.W.  
WASHINGTON CD 20006

Mailing Address

1850 K STREET, N.W.  
WASHINGTON CD 20006

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

52-1807981

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 \$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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
CARR, ROBERT O  
1850 K STREET, N.W.  
WASHINGTON CD 20006 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
DONOVAN, JOHN J. JR.  
1850 K STREET, N.W.  
WASHINGTON CD 20006 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President & Asst. Secretary ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
BRALOWER, STEVEN N  
1850 K STREET, N.W.  
WASHINGTON CD 20006 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Executive Vice President  
& Assistant Secretary ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
DONAVAN, JOSEPH  
1850 K STREET, N.W.  
WASHINGTON CD 20006 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
GRENINGER, RICH SR  
1850 K STREET, N.W.  
WASHINGTON CD 20006 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Senior Vice President ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
THOMAS, PHILLIP SR  
1850 K STREET, N.W.  
WASHINGTON CD 20006 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Senior Vice President ☒ 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

Enter Taxpayer Name here  
 Corporation Returns  
 For the year ended:  
 Enter Y/E here  
 Attention:  
 Enter Attn: here

CRESI

Attachment  
 00077917  
 # F99000006459

Jurisdiction	Form	Make Checks Payable to:	Payment Due Non-EFT - Mail Return to:	EFT Mail Return to:	C/T Taxpayer Filing Due Date	Payment Due
FLORIDA Uniform Business Report	2000 Uniform Business Report	Department of State	Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500	Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500	1-May	\$ 150