## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# G35167

350 ESSJAY RD #101

WILLIAMSVILLE, NY 14421

Address: City-St-Zip:

Entity Name: CIMINELLI DEVELOPMENT COMPANY OF FLORIDA, INC.

FILED May 01, 2002 8:00 AM Secretary of State

Current P	rincipal Place	of Business:	New Princi	New Principal Place of Business:		
CENTERPOINTE CORPORATE PARK 350 ESSJAY ROAD, SUITE 101 WILLIAMSVILLE, NY 14221			350 ESSJA	CENTERPOINTE CORPORATE PARK 350 ESSJAY ROAD, SUITE 101 WILLIAMSVILLE, NY 14221 US		
Current N	lailing Addres	ss:	New Mailin	New Mailing Address:		
CENTERPOINTE CORPORATE PARK 350 ESSJAY ROAD, SUITE 101 WILLIAMSVILLE, NY 14221			350 ESSJA	CENTERPOINTE CORPORATE PARK 350 ESSJAY ROAD, SUITE 101 WILLIAMSVILLE, NY 14221 US		
FEI Number	: 16-1235611	FEI Number Applied For ( )	FEI Number Not Applic	able ( ) Certificate of Status	Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and A	Name and Address of New Registered Agent:		
9200 SOU SUITE 508	ITH DADELAN					
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its	registered office or registered	agent, or both,	
SIGNATUI	RE:					
	Electron	nic Signature of Registered Age	ent	Date		
		o satisfy its Intangible Tax filing red g Trust Fund Contribution ( ).	uirement and elects to do	so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD ( CIMINELLI,FR/ 350 ESSJAY R WILLIAMSVILL	D. #101	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	V ( STARK, WILLI 350 ESSJAY R WILLIAMSVILL	D. #101	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name:	ST ( CIMINELLI, PA	) Delete UL F,	Title: Name:	( ) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: FRANK L. CIMINELLI PD 05/01/2002