

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G50803

1. Entity Name

CORPOREX PROPERTIES OF ORLANDO, INC.

Principal Place of Business

P.O. BOX 75020
ATTN: CORPORATE SECRETARY
CINCINNATI OH 45275

Mailing Address

P.O. BOX 75020
ATTN: CORPORATE SECRETARY
CINCINNATI OH 45275

2. Principal Place of Business

100 E RiverCenter Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite 1100

City & State

Covington, KY

Zip

41011

Country

Zip

Country

4. FEI Number

61-1034831

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

CT 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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
BUTLER, WILLIAM P
100 E RIVERCENTER BLVD STE 1100
COVINGTON KY 41011 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BLACKHAM, WILLIAM J III
100 E RIVERCENTER BLVD STE 1100
COVINGTON KY 41011 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BAUMEISTER, WILLIAM P
255 S. ORANGE AVE., #1144
ORLANDO FL 32801 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
550 Gills Drive
Orlando, FL 32824 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CAIRNS, MYLES
100 E RIVERCENTER BLVD STE 1100
COVINGTON KY 41011 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
BUTLER, MARTIN C
50 E RIVERCENTER BLVD
COVINGTON KY 41011 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
50 E Rivercenter Blvd, Ste 1400
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
Malott, Elva
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
Malott, Elva
100 E RiverCenter Blvd, Ste 1100
Covington, KY 41011
☐ Change ☒ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:

William Blackham III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/2001

859-292-5507

Date

Daytime Phone #

CR2E034 (10/00)