FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # M01864** 1. Entity Name I.R.E. ADVISORS SERIES 26, CORP. 4-30-2001 90331 042 ***150.00 Principal Place of Business Mailing Address P O BOX 5403 P O BOX 5403 962409 1320 G. DIXIE HIGHWAY - 🗢 1320-S. DIXIE-HIGHWAY FT LAUDERDALE FL 33310-5403 FT LAUDERDALE FL 33310-5403 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2423721 Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LEVAN, ALAN B. Street Address (P.O. Box Number is Not Acceptable) 1750 E SUNRISE BLVD 3RD FLOOR FT. LAUDERDALE FL 33304 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change TITLE ☐ Delete LEVAN, ALAN B. NAME 1750 E. SUNRISE BLVD STREET ADDRESS STREET ADDRESS 33304 FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE GILBERT, GLEN R. NAME NAME STREET ADDRESS 1750 E SUNRISE BLVD STREET ADDRESS 33304 CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE MCKENRY, CARL NAME NAME STREET ADDRESS 1750 E SUNRISE BLVD STREET ADDRESS 333*04* CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition PERTNOY, EARL NAME NAME 1750 E SUNRISE BLVD STREET ADDRESS STREET ADDRESS 33304 CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP ☐ Delete Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 to the corporation of the corporation of the corporation of 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 to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the corporation of the corporation of 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 the corporation of 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 the corporation of 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 the corporation of 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 the corporation of the receiver or trustee empowered to execute the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation of the corporation of the corporation of the corpora

SIGNATURE: _

SIGNATURE AND

Executive Vice President

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/2001

Daytime Phone #

CR2E034 (10)