

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000001236

Entity Name: M. R. LEBOWITZ, INC.

FILED  
Apr 23, 2003  
Secretary of State

## Current Principal Place of Business:

200 SANDESTIN LN.  
404  
DESTIN, FL 32550

## New Principal Place of Business:

## Current Mailing Address:

200 SANDESTIN LN.  
404  
DESTIN, FL 32550

## New Mailing Address:

1511 WATKINS  
212  
NAPERVILLE, IL 60540

FEI Number: 59-3495199

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEBOWITZ, MARCI R  
200 SANDESTIN LN.  
404  
DESTIN, FL 32550 US

## Name and Address of New Registered Agent:

LEBOWITZ-KURTZ, MARCI R  
200 SANDESTIN LN.  
404  
DESTIN, FL 32550 US

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: MARCI LEBOWITZ-KURTZ

04/23/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ROBERTS, JEAN MRS  
Address: 2767 LOGONDALE DR  
City-St-Zip: ORLANDO, FL 32817

Title: T ( ) Delete  
Name: BENNETT, DENICE MRS  
Address: 940 DOUGLAS AVE, 172  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: T ( ) Delete  
Name: MCCREADIE, STEVEN MR  
Address: 1049 E POINT WASH. RD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: T ( ) Delete  
Name: DUDLEY, HARRIET MRS  
Address: 2410 SHADYWOOD CIRCLE  
City-St-Zip: CROTON, MD 21114

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MRS. JEAN ROBERTS

D

04/23/2003

Electronic Signature of Signing Officer or Director

Date