

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000030201

FILED  
Apr 12, 2002 8:00 AM  
Secretary of State

**Entity Name:** TOWNE CENTER PROPERTIES, INC.

**Current Principal Place of Business:**

2400 E. COMMERCIAL BLVD., SUITE 826  
FT. LAUDERDALE, FL 33308

**New Principal Place of Business:**

620 COLLEGE AVENUE  
HAVERFORD, PA 19041

**Current Mailing Address:**

2400 E. COMMERCIAL BLVD., SUITE 826  
FT. LAUDERDALE, FL 33308

**New Mailing Address:**

620 COLLEGE AVENUE  
HAVERFORD, PA 19041

**FEI Number:** 23-2748442

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRAZIER, ROBERT W JR.  
2400 E. COMMERCIAL BLVD., SUITE 826  
FT. LAUDERDALE, FL 33308

**Name and Address of New Registered Agent:**

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:**

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: BELMONT, BARRY J  
Address: 620 COLLEGE AVE.  
City-St-Zip: HAVERFORD, PA 19041

Title: VD ( ) Delete  
Name: BELMONT, GORDON L  
Address: 76245 FAIRWAY DR.  
City-St-Zip: INDIAN WELLS, CA 92210

Title: TD ( ) Delete  
Name: GRESSEN, JACK  
Address: 17613-D ASHBOURNE LANE  
City-St-Zip: BOCA RATON, FL 33496

**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:

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.

**SIGNATURE:** BARRY J. BELMONT

PSD

04/12/2002

Electronic Signature of Signing Officer or Director

Date