

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90112 019 ***150.00

DOCUMENT # P06223

1. Entity Name

LNC REALTY CORPORATION

Principal Place of Business

Mailing Address

% COMPLIANCE DEPT
200 E BERRY ST
FT. WAYNE IN 46802-3506
US

% COMPLIANCE DEPT
PO BOX 2390
FT. WAYNE IN 46802-3506
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **35-1610501**

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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	D	<input checked="" type="checkbox"/> Delete
NAME	MCMEEKIN, H. THOMAS	
STREET ADDRESS	2005 MARKET ST 39TH FLOOR	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	V	<input type="checkbox"/> Delete
NAME	KORINKE, WALTER M	
STREET ADDRESS	200 E BERRY ST	
CITY-ST-ZIP	FORT WAYNE IN 46802	
TITLE	S	<input type="checkbox"/> Delete
NAME	ROSE, CYNTHIA A	
STREET ADDRESS	1300 S CLINTON ST	
CITY-ST-ZIP	FT WAYNE IN 46801	
TITLE	VT	<input checked="" type="checkbox"/> Delete
NAME	CHRZAN, JANET C	
STREET ADDRESS	1500 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA PA 19102-2112	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BRODY, STEVEN R.	
STREET ADDRESS	200 E BERRY ST	
CITY-ST-ZIP	FT. WAYNE IN	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BERRY, DAVID A	
STREET ADDRESS	200 E BERRY ST	
CITY-ST-ZIP	FORT WAYNE IN 46802	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DRISCOLL, JUDE T.	
STREET ADDRESS	2005 MARKET STREET	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CRAWFORD, FREDERICK J.	
STREET ADDRESS	1500 MARKET STREET	
CITY-ST-ZIP	PHILADELPHIA PA 19102-2112	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	QUEK, SEE YENG	
STREET ADDRESS	2005 MARKET STREET	
CITY-ST-ZIP	PHILADELPHIA PA 19103	

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter M. Korinke, Vice President and Director

March 27, 2001 219-455-3938

Date

Daytime Phone #

CR2E034 (10/00)

0631497