

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
 05-11-2001 90077 039 ***150.00

0596432

DOCUMENT # P34533

1. Entity Name

GANNETT FLEMING VALUATION AND RATE CONSULTANTS,

Principal Place of Business

Mailing Address

207 SEATE AVE
 CAMPTILL PA 17011
 US

P.O. BOX 67100
 HARRISBURG PA 17106

2. Principal Place of Business

207 SENATE AVENUE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CAMP HILL, PA

City & State

Zip

17011

Country

US

Zip

Country

4. FEI Number

23-2147341

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

MYUNG-HAK, SUNG
 SUITE 295, ONE PRESIDENTS PLAZA
 4902 EISENHOWER BLVD.
 TAMPA FL 33634

Name

MYUNG-HAK SUNG

Street Address (P.O. Box Number is Not Acceptable)

SUITE 150, WESTLAKE CORP. CTR.

9119 CORPORATE LAKE DRIVE

City TAMPA

FL

Zip Code

33634-6323

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 reinstalling)

DATE

4-20-2001

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 CPD
 NAME STOUT, WILLIAM M.
 STREET ADDRESS 220 N. GATE DR.
 CITY-ST-ZIP CAMP HILL PA ☐ Delete

TITLE TD
 NAME LEE, MICHAEL T.
 STREET ADDRESS 455 E. CRESTWOOD DR
 CITY-ST-ZIP CAMPHILL PA ☐ Delete

TITLE VPSD
 NAME HERBERT, PAUL R.
 STREET ADDRESS 4880 PINE HILL ROAD
 CITY-ST-ZIP HARRISBURG PA ☐ Delete

TITLE AS
 NAME RUTTER, CHERYL A
 STREET ADDRESS 6120 EVELYN ST
 CITY-ST-ZIP HARRISBURG PA 17111 ☐ Delete

TITLE D
 NAME ELLIOTT, JAMES C
 STREET ADDRESS 250 N 27TH STREET
 CITY-ST-ZIP CAMP HILL PA 17011 ☐ Delete

TITLE D
 NAME TALIAN, STEPHEN
 STREET ADDRESS 4987 FARMINGTON RD
 CITY-ST-ZIP HARRISBURG PA ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS 804 DERBY AVENUE
 CITY-ST-ZIP CAMP HILL, PA 17011 ☒ Change ☐ Addition

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

TITLE
 NAME
 STREET ADDRESS 4105 KINGSWOOD COURT
 CITY-ST-ZIP HARRISBURG, PA 17112 ☒ Change ☐ Addition

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

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

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:

William M. Stout
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/01 717-763-7211

CR2E034 (10/00)