

2001 UNIFORM BUSINESS REPORT (UBR)

0105659 AT

DOCUMENT # P35957

1. Entity Name
M.D. SASS REALTY CORP.

FILED
01 AUG 16 PM 1:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business % REAL ESTATE CAPITAL PARTNERS 1185 AVE OF THE AMERICAS NEW YORK NY 10036 US	Mailing Address % REAL ESTATE CAPITAL PARTNERS 1185 AVE OF THE AMERICAS NEW YORK NY 10036 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number 13-3637715	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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 _____ (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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KINNEY, ROBERT L. 1185 AVE OF THE AMERICAS NEW YORK NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHEWER, KARIN E. 1185 AVE OF THE AMERICAS NEW YORK NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAMLE, HUGH R. 1185 AVE OF THE AMERICAS NEW YORK NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WINTER, MARTIN E. 1185 AVE OF THE AMERICAS NEW YORK NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCGEE, ROBERT J 1185 AVE OF THE AMERICAS NEW YORK NY <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SASS, MARTIN D. 1185 AVE OF THE AMERICAS NEW YORK NY <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200004538902-8 -08/16/01-01081-001 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *[Signature]* **8-7-01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034-15/01



REAL ESTATE CAPITAL PARTNERS

Limited Partnership

August 7, 2001

Division of Corporation
Registration Section
409 East Gaines Street
Tallahassee, FL 32399

Attn: Diane Cushing

Re: M.D. Sass Realty Corp.
Document # P35957

Dear Ms. Cushing:

On August 2, 2001, you spoke with my assistant, Carrie Marsh, regarding the 2001 Uniform Business Report for the above entity. You stated that the report was mailed out in January and was due by May 1st. We did not receive the report. As per your instructions, we are remitting only the amount due and all penalties have been waived.

Please feel free to contact me directly at (212) 655-4381.

Thank you for your attention in this matter.

Sincerely,

Ellyn Turner
Controller
Enc.