2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P30073

1. Entity Name ORLANDO COGE		J				
Principal Place of Busine	ss	Mailing Address				
8300 EXCHANGE DR. ORLANDO FL 32809		7201 Hamilton BlvD Tax Dept Allentown Pa 18195 Us				
2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address Suite, Apt. #, etc.				
		Zip	Country	Zip	Country	

FILED May 04, 2001 8:00 am Secretary of State 05-04-2001 90097 039 ***150.00

Principal Place									
	e of Business	Mailing Address							
	D EXCHANGE DR. 7201 HAMILTON BLVD ANDO FL 32809 TAX DEPT ALLENTOWN PA 18195 US) (44)(44) (40) (61) (81) (81) (81) (81) (81) (81) (81) (8						
2. Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
City 9 State		City & State	City & State		4. FEt Number 22-2684200			I IAI	plied For
City & State C		Oily & Olato			4. FEI Number 23-2684299				ot Applicable
Zip	Country	Zip Country		5. C	Pertificate of Status Desired	\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. N	ame and Address of New Reg	jistered Aç	jent		
	Company the management	ي سوريي سه		Name~ -		ه مسارمات و پا ت راسه	- . ~ *		~ •
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Street Address (P.O. Box Number is Not Acceptable)						
PLAN'	TATION FL 33324					- G		•	
				City	-		FL	Zip Cod	e
R The above	named entity submits this statement	for the purpose of changing	n its renistera	d office or regis	tered and	ent, or both, in the State of Flori		•	
o. The above	named emity submits this statement	for the purpose of orlanging	g no registore	a amee or regio	ioroa aga	, in the second and the second are second as the second are second are second as the second are second are second as the			
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. {	(NOTE: Registered	Agent signature requ	ired when rei	nstating)	DATE		
	· · · · · · · · · · · · · · · · · · ·		W!!! FEE	C \$150.00		- <u></u>			
Tax filing requirement and elects to do so. After MA		After MAY 1,	,2001 Fee	will be \$550.00		Election Campaign Final Trust Fund Contribution.	• —		May Be to Fees
11.		D DIRECTORS	12.			DITIONS/CHANGES TO OFFIC	ERS AND D	DIRECTOR	S IN 11
	AT	☐ Delete	TITLE					Change	☐ Addition
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	4488 LINDA LANE		STRE	T ADDRESS			,		
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of the corporation or the repelver 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 attach right with an address, with all other like empowered.

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PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David H. Green

Assistant Treasurer

4/25/01

610-481-7598

Daytime Phone #