

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State
 04-16-2001 90478 048 ***150.00

0326019

DOCUMENT # P93000055096

1. Entity Name

PIKE MANAGEMENT & REALTY, INC.

Principal Place of Business

Mailing Address

218 ROYAL PALM WAY
 PALM BEACH FL 33480
 US

P.O. BOX 2771
 PALM BEACH FL 33480

2. Principal Place of Business

324 Royal Palm Way
 Suite, Apt. #, etc.
 Ste. 231

3. Mailing Address

Suite, Apt. #, etc.

City & State

Palm Beach, FL

City & State

4. FEI Number

65-0428385

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

HAISFIELD, MARC

~~218 ROYAL PALM WAY~~ 324 Royal Palm Way, Ste. 231
 PALM BEACH FL 33480

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DSP
 HAISFIELD, MARC
~~218 ROYAL PALM WAY~~
 PALM BEACH FL 33480 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☒ Change ☐ Addition
 324 Royal Palm Way, Ste. 231

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VDT
 HAISFIELD, RANDY
~~218 ROYAL PALM WAY~~
 PALM BEACH FL 33480 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☒ Change ☐ Addition
 324 Royal Palm Way, Ste. 231

TITLE
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 CITY-ST-ZIP
☐ Delete

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☐ Change ☐ Addition

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 CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied in 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:

Marc Haisfield President

4/9/01

561-655-2829

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)