

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 30, 2001 8:00 am**  
**Secretary of State**

0694133

**DOCUMENT # P93000076246**

1. Entity Name

**SEVEN RIVERS PROPERTY INVESTORS, INC.**

03-30-2001 90320 021 \*\*\*150.00

Principal Place of Business C/O RANIERI & CO INC 50 CHARLES LINDBERGH BLVD. STE 500 UNIONDALE NY 11553 US	Mailing Address C/O RANIERI & CO INC 50 CHARLES LINDBERGH BLVD. STE 500 UNIONDALE NY 11553 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4007 North Lecanto Hwy.	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State Beverly Hills, FL	City & State
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4. FEI Number 59-3217460	Applied For Not Applicable
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Zip 34465	Country US	Zip	Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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)  
**1201 Hays Street, Suite 105**

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 \$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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>DGP</del> <del>RANIERI, LEWIS S</del> <del>50 CHARLES LINDBERGH BOULEVARD, STE. 500</del> <del>UNIONDALE NY 11553</del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SHAY, SCOTT A 50 CHARLES LINDBERGH BLVD., STE. 500 UNIONDALE NY 11553 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>G</del> <del>BRANDT, LAURA M</del> <del>50 CHARLES LINDBERGH BLVD., SUITE 500</del> <del>UNIONDALE NY 11553</del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>F</del> <del>PERRO, ROBERT A</del> <del>50 CHARLES LINDBERGH BLVD., STE. 500</del> <del>UNIONDALE NY</del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>D</del> <del>WEISS, KENNETH C</del> <del>165 BROADWAY</del> <del>NEW YORK NY 10006</del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC Ranieri, Lewis S. 50 Charles Lindbergh Blvd., Suite 500 Uniondale, NY 11553 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mullen, John F. 50 Charles Lindbergh Blvd., Suite 500 Uniondale, NY 11553 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Bertocchi, Michael 1400 N. Harwick Pt. Crystal River, FL 34429 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS Perro, Robert A. 50 Charles Lindbergh Blvd., Suite 500 Uniondale, NY 11553 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Weiss, Kenneth C. c/o Lazard Asset Management 30 Rockefeller Plaza, NY, NY 10112-6300 <input checked="" 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: Robert A. Perro Robert A. Perro, Secretary 3/19/01 (516) 745-6644  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)