## ,2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address

SIGNATURE:

## DOCUMENT # **P94000077056** May 01, 2000 8:00 am Secretary of State PARKER-RALEIGH DEVELOPMENT XXVI, INC. 05-01-2000 90431 037 \*\*\*150.00 Principal Place of Business Mailing Address 201 N. FRANKLIN ST. 201 N. FRANKLIN ST. **SUITE 2100 SUITE 2100** TAMPA FL 33602-5167 TAMPA FL 33602 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3292695 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EDWARDS, JOSEPH D Street Address (P.O. Box Number is Not Acceptable) 201 N. FRANKLIN ST. **SUITE 2100 TAMPA FL 33602** 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 DATÉ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PSD TITLE Change ☐ Addition TITLE Delete GLICK, ADAM NAME NAME STREET ADDRESS 118 W. 57TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** ☐ Change ☐ Addition ☐ Delete TITLE PARKER, JACK NAME NAME STREET ADDRESS STREET ADDRESS 118 W 57TH STREET CITY-ST-7IP CITY-ST-ZIP NY NY ☐ Addition ☐ Change VAS ☐ Delete TITLE MITCHELL, STEPHEN J. NAME NAME 201 N FRANKLIN STREET SUITE 2100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tampa Fl ☐ Addition VAS Change Delete TITLE TITLE BRADY, DAVID NAME NAME 5500-103 ATLANTIC SPRINGS RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC TITLE ☐ Change Addition ☐ Delete Tr LE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 path; that I am an officer or director of the corporation or the receiver or trustee empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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⊈DAdam Glick

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212-333-3353x204