

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000053673

1. Entity Name

ALLIED/BILTMORE, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90165 033 ***150.00

Principal Place of Business Mailing Address
C/O URDANG & ASSOCIATES REAL ESTATE ADVS. C/O URDANG & ASSOCIATES REAL ESTATE ADVS.
630 WEST GERMANTOWN PIKE, SUITE 321 630 WEST GERMANTOWN PIKE, SUITE 321
PLYMOUTH MEETING PA 19462 PLYMOUTH MEETING PA 19462-1074

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 23-2819898

Applied For
Not Applicable

Zip

Country

Zip

Country

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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, 2000 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 DP ☐ Delete
NAME URDANG, E. SCOTT
STREET ADDRESS 630 WEST GERMANTOWN PIKE, SUITE 321
CITY-ST-ZIP PLYMOUTH MEETING PA 19462

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VS ☐ Delete
NAME BLUM, DAVID J
STREET ADDRESS 630 W GERMANTOWN PIKE, SUITE 321
CITY-ST-ZIP PLYMOUTH MEETING PA 19462

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME NOVICK, STEVEN C
STREET ADDRESS 630 W GERMANTOWN PIKE, SUITE 321
CITY-ST-ZIP PLYMOUTH MEETING PA 19462

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME SANFILIPPO, VINCENT J
STREET ADDRESS 630 W GERMANTOWN PIKE, SUITE 321
CITY-ST-ZIP PLYMOUTH MEETING PA 19462

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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: *David J. Blum* **David J. Blum** 1-14-2000 610-834-9500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)