

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000074397

1. Entity Name

PR WEST PALM, INC.

FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90041 013 ***550.00

Principal Place of Business

200 SOUTHBROAD ST
THIRD FLOOR
PHILADELPHIA PA 19102

Mailing Address

200 SOUTHBROAD ST
THIRD FLOOR
PHILADELPHIA PA 19102

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-2074983

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
CFO
GLICKMAN, EDWARD
455 PENNSYLVANIA AVE
FT. WASHINGTON PA 19034 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
LINN, JEFFREY A
455 PENNSYLVANIA AVE., SUITE T35
FT. WASHINGTON PA 19034 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
MASSIMINI, DANTE J
455 PENNSYLVANIA AVE., STE 135
FT. WASHINGTON PA 19034 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
c/o
PREIT Associates, L.P.
200 South Broad Street, 3rd Floor
Philadelphia, PA 19102 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
c/o
PREIT Associates, L.P.
200 South Broad Street, 3rd Floor
Philadelphia, PA 19102 ☒ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
J.T.
DAVID BRYANT
PREIT Associates, L.P.
200 South Broad Street, 3rd Floor
Philadelphia, PA 19102 ☐ Change ☒ Addition

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

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

DAVID BRYANT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/00
Date

215-875-0700
Daytime Phone #

CR2E034 (5/00)