

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000026296**

1. Entity Name

REIT INVESTMENT ADVISORY SERVICES, INC.**FILED****Apr 11, 2001 8:00 am**
Secretary of State

04-11-2001 90138 030 ***150.00

Principal Place of Business

**760 U.S. HWY. 1
SUITE 300
NORTH PALM BEACH FL 33408**

Mailing Address

**760 U.S. HWY. 1
SUITE 300
NORTH PALM BEACH FL 33408**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0660549**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

**SMITH, DR. HALBERT C
760 U.S. HWY. 1
SUITE 300
NORTH PALM BEACH FL 33408**

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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D									
	SELDIN, MAURY	760 U.S. HWY. 1, STE. 300	NORTH PALM BEACH FL 33408							
	PSTD									
	SMITH, HALBERT C	760 U.S. HWY. 1, STE. 300	NORTH PALM BEACH FL							
	VATO									
	DONOHUE, RON	760 U.S. HWY. 1, STE. 300	NORTH PALM BEACH FL							
	AS									
	HOWARD, THOMAS L	801 PENNSYLVANIA AVE SUITE 800	WASHINGTON DC							

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:

Ron M. Donohue
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/9/01 561-644-7621

CR2E034 (10/00)