## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Apr 24, 2002 8:00 am Secretary of State P97000093012 DOCUMENT # 1. Entity Name STREICHER REALTY, INC. 04-24-2002 90378 039 \*\*\*158.75 Principal Place of Business 800 W. CYPRESS CREEK RD., STE. 580 800 W. CYPRESS CREEK RD., STE. 580 V01202 FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Numbe Applied For 65-0797838 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7: Name and Address of New Registered Agent-Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 8. The above famed 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. П Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Addition NAME STREICHER, STANLEY H. Beard Wendell R. NAME 943 PEPPERIDGE TERR. STREET ADDRESS 1690'3 5. W. 79 Place STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33486** CITY-ST-7IP Miani FL 33157 TITLE ☐ Delete TITLE Change ☐ Addition MURPHY, JOSEPH M NAME STREET ADDRESS 1700 S. DIXIE HWY., STE. 510 STREET ADDRESS CITY-ST-ZIF **BOCA RATON FL 33432** CITY-ST-ZIP TITLE D Delete TITLE Change **■** Addition NAME O'Connor C. Rodney 640 Fitth Ave, 15 Floor O'NEIL, JOHN H JR NAME STREET ADDRESS 520 S.E. 5 AVE., APT. 1312 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33301 CITY-ST-ZIP New York, N. Y. TITI F Delete TITLE Change Addition NAME GATHRIGHT, RICHARD E Rybert, W. Greg NAME STREET ADDRESS 800 W. CYPRESS CREEK RD., STE, 580 STREET ADDRESS 413 Whiskey Road CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP diken S.C TITLE ☐ Delete TITLE ☐ Change Addition NAME GOLDEN, E SCOTT NAME PICOW ROBERTS. STREET ADDRESS 644 S E 4TH AVE STREET ADDRESS 7534' Isla Verde Was CITY-ST-ZIP FT LAUDERDALE FL 33301 CITY-ST-ZIP TITLE VTS Delete TITLE ☐ Change **Addition** NAME BARRETT, WALTER B Shore, Mrchael S. 800 W. Cy press Creek R.D. Suite 580 NAME STREET ADDRESS 800 W. CYPRESS CREEK RD., STE. 580 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33309 CITY-ST-ZIP Lauderdale 13. I hereby certify that the information supplied with this filling 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.

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