

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90069 030 ***150.00

DOCUMENT # P98000053691

1. Entity Name

ALLIED/CONCORD, INC.



Principal Place of Business

C/O URDANG & ASSOCIATES REAL ESTATE
630 WEST GERMANTOWN PIKE - SUITE 321
PLYMOUTH MEETING PA 19462

Mailing Address

C/O URDANG & ASSOCIATES REAL ESTATE
630 WEST GERMANTOWN PIKE - SUITE 321
PLYMOUTH MEETING PA 19462

34001000



MOORE

CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.
Suite 300

City & State

3. Mailing Address

Suite, Apt. #, etc.
Suite 300

City & State

4. FEI Number

58-2406253

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: DP ☐ Delete
NAME: URDANG, E S
STREET ADDRESS: C/O 630 WEST GERMANTOWN PIKE #321
CITY-ST-ZIP: PLYMOUTH MEETING PA 19462

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

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

TITLE: T ☐ Delete
NAME: FERST, RICHARD J
STREET ADDRESS: 630 W GERMANTOWN PIKE STE 321
CITY-ST-ZIP: PLYMOUTH MEETING PA 19462

TITLE: V ☐ Delete
NAME: GRECO, MARK B
STREET ADDRESS: 630 W GERMANTOWN PIKE STE 321
CITY-ST-ZIP: PLYMOUTH MEETING PA 19462

TITLE: S ☐ Delete
NAME: GRESHAM, MELISSA
STREET ADDRESS: 630 W GERMANTOWN PINE STE 321
CITY-ST-ZIP: PLYMOUTH MEETING PA 19462

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☒ Change ☐ Addition
NAME: Suite 300
STREET ADDRESS: Suite 300
CITY-ST-ZIP: Suite 300

TITLE: ☒ Change ☐ Addition
NAME: Suite 300
STREET ADDRESS: Suite 300
CITY-ST-ZIP: Suite 300

TITLE: ☒ Change ☐ Addition
NAME: Suite 300
STREET ADDRESS: Suite 300
CITY-ST-ZIP: Suite 300

TITLE: ☒ Change ☐ Addition
NAME: COO
STREET ADDRESS: Suite 300
CITY-ST-ZIP: Suite 300

TITLE: ☒ Change ☐ Addition
NAME: Suite 300
STREET ADDRESS: Suite 300
CITY-ST-ZIP: Suite 300

TITLE: ☒ Change ☐ Addition
NAME: Suite 300
STREET ADDRESS: Suite 300
CITY-ST-ZIP: Suite 300

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

David J. Blum David J. Blum

4-6-04 610-834-9500