2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P40805 1. Entity Name PIZZUTI REALTY OF FLORIDA, INC.					FILED Mar 22, 2002 8:00 am Secretary of State 03-22-2002 90037 011 ***150.00		
Principal Place of Business 250 E. BROAD STREET SUITE 1900 COLUMBUS OH 43215		Mailing Address 250 E. BROAD STREET SUITE 1900 COLUMBUS OH 43215					
2. Principal Place of Business		3. Mailing Address			U TRANSPORT DER BERGET BETRET KREET BREIT BETRET BETRET BERGET BERGET BERGET BERGET BERGET. 		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS	SPACE	
City & State		City & State		4.	. FEI Number 31-1360044 ~	Applied For Not Applicab	le
Zip	Country	Zip	Country	5.	. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent	Name	7.	Name and Address of New Registered	Agent	
SIMBACK, KENNETH P 255 SOUTH ORANGE AVE. STE. 1350 ORI ANDO EL 20001			356t	ddress (P.O. Box Number is Not Acceptable) LATENNATIONAL PKNY 512 300			
ORLANDO FL 32801				Heathrow FL 390946			
SIGNATURE	e named entity submite this statement for Signature typed or printed name of registered agent a	nd title if applicable. (NOTE	E Registered Agent signa	LUITE required when	ichack 21	20/02	
Tax filing (See crite	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	After May 1, 200 Make Check Payab	le to Departmer	550.00 nt of State		S5.00 May Be Added to Fees	
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND E SIMBACK; KENNETH P. 255 S. ORANGE AVENUE, SUITE ORLANDO FL 32801	Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P P1220 750	ADDITIONS/CHANGES TO OFFICERS AN HI RONALD A E. Brind St., SI A VUS OH 43215	Change 🗌 Additio	∋ CR2E034 (9/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS DALEY, RICHARD C 250 EAST BROAD ST., SUITE 190 COLUMBUS OH	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			Change Additio	CR2
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T _CRAMER, JAMES P 250 E. BROAD ST., SUITE 1900 COLUMBUS OH	. · Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		43	□ Change ☑ Additio 3 2-15	'n
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			🗌 Change 🔛 Additio	ก
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY - ST-ZIP			🗌 Change 🛛 Additio	IN
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADORESS CITY-ST-ZIP			Change Additio	n
13. I hereby c indicated of the cor changed	poration or the receiver or trustee empow , or on an attachment with an appress, wi	bis filing toes nonqualify for true and accurate and that m were to execute this report a tith all other like empowered.	as required by Ch.	apter 607, Flo	n 119.07(3)(i), Florida Statutes. I further ce a legal effect as if made under oath; that I rida Statutes; and that my name appears	in Block 11 or Block 12 if	
SIGNAT	URE:	INTED NAME OF SIGNING OFFICER C	DR DIRECTOR	Icr	2/20/02 614	- 280 . 4000 Daytime Phone #	