

CLIENT OPENING SURVEY FORM

| Mr/Mrs/Miss | Laurel | Rsitlsr |
|--|--------------------|------------------------------|
| MR./MRS./MISS | FIRST NAME | LAST NAME |
| 410-420-4862 | | 410-947-6906 |
| CONTACT NUMBER | | ALTERNATE NUMBER |
| | COMPANY DATA I | BASE |
| 1 41 0 41 | Oakwood Marina Del | |
| urel_reitler@reitler.com EMAIL ADDRESS | Rey COMPANY NAME | - oakwood.com WEBSITE URL |
| ŇA | | |
| Address | | |
| Marina Del Rey | CA | 90292 |
| City | State | ZIP Code |
| Operators of Apartment Buildi | ngs | |
| SIC DESCRIPTION | | |
| 6513 | | Independent |
| SIC CODE | | ENTITY TYPE |
| Unknown | | 594,200.02 |
| COMPANY SALES | | REVENUE (USD) |
| Los Angeles | | YES |
| COUNTRY/REGION | | MEDICAL INSURANCE |
| | | |
| • | | • |
| US Hwy 1 S, Saint Augustine, F Dr S, Saint Augustine, FL 3208 | | d +1 (904) 117- 1782 |