

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **831894** ✓

1. Corporation Name

TRUMBULL CORPORATION

Principal Place of Business

1020 LEBANON ROAD
P.O. BOX 98100
PITTSBURGH PA 15227

Mailing Address

1020 LEBANON ROAD
P.O. BOX 98100
PITTSBURGH PA 15227

FILED
Jul 22, 1999 8:00 am
Secretary of State

07-22-1999 90015 040 ***550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/26/1974

4. FEI Number

25-1021993

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE

NAME **RAGO, MICHAEL J.**
STREET ADDRESS **891 FREDERICKA DRIVE**
CITY-ST-ZIP **BETHEL PARK PA**

TITLE **DVT** ☐ DELETE

NAME **CLARK, STEPHEN M.**
STREET ADDRESS **1046 GRANDVIEW FARMS DR**
CITY-ST-ZIP **BETHEL PARK PA**

TITLE **VD** ☐ DELETE

NAME **HECHT, ROBERT**
STREET ADDRESS **1743 HASTINGS MILL RD**
CITY-ST-ZIP **PITTS PA**

TITLE **D** ☒ DELETE

NAME **DICK, LOUISE H.**
STREET ADDRESS **123 VILLAGE CT**
CITY-ST-ZIP **PITTSBURGH PA**

TITLE **D** ☐ DELETE

NAME **ROWE, DIANE D.**
STREET ADDRESS **2119 BLAIRMONT DR.**
CITY-ST-ZIP **PITTSBURGH PA**

TITLE **D** ☐ DELETE

NAME **HECHT, JANE S**
STREET ADDRESS **1743 HASTINGS MILL RD**
CITY-ST-ZIP **PITTSBURGH PA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition

1.2 NAME **HECHT, ROBERT G.**
1.3 STREET ADDRESS **2077 BLAIRMONT DRIVE**
1.4 CITY-ST-ZIP **PITTSBURGH PA 15241**

2.1 TITLE **VD** ☐ Change ☒ Addition

2.2 NAME **ROWE, CLIFFORD R.**
2.3 STREET ADDRESS **125 FROEBE ROAD**
2.4 CITY-ST-ZIP **VENETIA PA 15367**

3.1 TITLE **D** ☒ Change ☐ Addition

3.2 NAME **ROWE, DIANE D.**
3.3 STREET ADDRESS **125 FROEBE ROAD**
3.4 CITY-ST-ZIP **VENETIA PA 15367**

4.1 TITLE **D** ☒ Change ☐ Addition

4.2 NAME **HECHT, JANE D.**
4.3 STREET ADDRESS **2077 BLAIRMONT DRIVE**
4.4 CITY-ST-ZIP **PITTSBURGH PA 15241**

5.1 TITLE **ASST S** ☐ Change ☒ Addition

5.2 NAME **DOMINIC R. COCCAGNA**
5.3 STREET ADDRESS **1350 STOLZ ROAD**
5.4 CITY-ST-ZIP **BETHEL PARK PA 15102**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **REQUIRE**

JULY 14, 1999 (412) 462-9300

CR2E034 (5/99)