FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

YORK PA 17404

617 MARKET STREET

PROFIT
CORPORATION
ANNUAL REPORT
1999

Principal Place of Business 617 MARKET STREET

YORK PA 17404



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 846671

ST. ONGE, RUFF & ASSOCIATES, INC.

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90037 017 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

						08/06/1980				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied F				
21		26				23-1310129		No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired 5. Certifcate of Status Desired Fee Required				
City & State		City & State	<u></u>			6. Election Campaign Financing		\$5.00	May Be	
23		28	28			Trust Fund Contribution Added to Fees				
Zip Country Zip			Country			8. This corporation owes the current year	Intang	gible		
			30			Personal Property Tax.		Yes	™ No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Register	ed Ag	ent		
					81 Name					
C T CORPORATION SYSTEM				63 Chart Address (B.O. Boy Number in Not Accontable)						
1200 S. PINE ISLAND RD.			18	82 Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324				83						
I PHILIPHICK I E COOL+										
			[8	34 (City		: L_	85 Zip	Code	
11 Dummer	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abo	ove-r	named como	oration submits this statement for the purpose	of ch	anging its	registered	
office or n	enistered enent of both in the State O	it Florida. Such chande was auti	nonzea i	ov tn	e corporation	n's board of directors. I hereby accept the ap	pointn	nent as re	gistered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE		AIOTÉ. P	4			when reinstating) DATE				
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re OFFICERS AND DIRECTORS			gent s	Agriatus e required	ADDITIONS/CHANGES TO OFFICERS		DIRECTO	ORS IN 12	
		ND DIRECTORS 13 ☐ DELETE 1.11						Change	☐ Addition	
TITLE	P		1.2 NAM							
NAME	COOKSEY, DAVID L					110 Tem Ginals				
STREET ADDRESS,	1010101011101		1	-	l l	110 Lyn Circle York, PA 17403				
CITY-ST-ZIP	YORK PA 17402	47) - 1	1.4 CITY					Change	X Addition	
TITLE	/ V	X DELETE	2.1 TITL		i	V	L	_1 Originge	ag / toutage	
NAME	ARNOLD, RODGER E		2.2 NAM	2.2 NAME []		BRICKNER, JEFFREY C				
STREET ADDRESS	SOTT INC THE NONE			2.3 STREET ADDRESS		745 SOUTHERN ROAD				
CITY-ST-ZIP	10th 17 11409					YORK, PA 17403	`	70		
TITLE	VΤ	☐ DELETE	3.1 TITL	3.1 TITLE			Ĺ] Change	Addition	
NAME	EMSING, JAMES E			Æ]	•				
STREET ADDRESS				EET A	DORESS					
CITY-ST-ZIP				Y-ST-	ZIP	<u> </u>				
TITLE	D	☐ DELETE	4.1 TiTL	E	1		[Change	Addition	
NAME	SCHIELER, RICHARD F.		4. 2 NA	ME)					
STREET ADDRESS			4.3 STR	EET A	DDRESS					
CITY-ST-ZIP	YORK PA		4.4 CIT	Y-ST-Z	ZIP					
TITLE	VS	☐ DELETE	5.1 TITL				(Change	☐ Addition	
NAME	FOREMAN, BARRY E		5.2 NAM	Æ	Į					
STREET ADDRESS			5.3 STR	REETA	DORESS					
	MT. JOY PA 17552		5.4 CIT	Y-ST-2	ZIP					
CITY-ST-ZIP	MI. JUI PA 1/332	DELETE	6.1 TITL					Change	Addition	
	{ •		6.2 NAA	Æ	}			•		
NAME	KENDIG, STUART B			_	DORESS	ADDITIONAL LIST ATTACHE	T			
SIRCE MUNICOS 3210 NUFFENT ND.			6.4 CIT		- 1	WODIIIONAD PISI WIIWCUE	<u>ل</u>			
CITY-ST-ZIP	YORK PA 17404			,-01-4		Section 440 07(2Vi) Florida Statutos I furthe	-ortifi	, that the	information	

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, with all other like empowered.

SIGNATURE:

MUSICALIST REQUIRED

02/03/99

(717) 854-3861

Daylime Phone #

CR2E034 (11/98)

OFFICERS & DIRECTORS OF ST. ONGE, RUFF & ASSOCIATES, INC. (A Pennsylvania Corporation)

Florida - Annual Report Question #12 - Additional List

Officers

Title Name

Street Address City,St-Zip

ASST TREASURER GLASSMYER, WILLIAM W 1004 MARHERITA COURT RED LION, PA 17356

Directors

Title

Name Street Address

City,St-Zip

D

BREMNER, WILLIAM R 1908 CARLTON PLACE LANCASTER, PA 17601

Title

Name

Street Address

City,St-Zip

LANDIS, DONALD E

2559 OVERLOOK DRIVE

YORK, PA 17403

Title

Name

HEISER, WILLIAM E

Street Address

R.D. #6

City,St-Zip

SPRING GROVE, PA 17362