## **2002 UNIFORM BUSINESS REPORT (UBR)**

## **FILED** May 22, 2002 8:00 am Secretary of State DOCUMENT # F00000003498 1. Entity Name 05-22-2002 90113 039 \*\*\*158.75 GANNETT FLEMING PROJECT DEVELOPMENT CORPORATION Principal Place of Business Mailing Address PO BOX 67100 PO BOX 67100 **HARRISBURG PA 17106-7100** HARRISBURG PA 17106-7100 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 23-2947721 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired $\mathbf{Z}$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DOUGHERTY, JÖHN V Street Address (P.O. Box Number is Not Acceptable) STE 150, 7751 BELFORT PKWY JACKOSNVILLE FL 32256 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PCD ☐ Defete TITLE Change ☐ Addition NAME DIETZ. ROBERT J NAME STREET ADDRESS STREET ADDRESS 207 SENATE AVENUE CITY-ST-ZIP CITY-ST-ZIP CAMP HILL PA TITLE ☐ Delete TITLE Addition Change NAME NAME CONDERMAN, CHARLES W STREET ADDRESS STREET ADDRESS 207 SENATE AVENUE CITY-ST-ZIP CITY-ST-7IP CAMP HILL PA TITLE ☐ Delete TITLE ■ Addition VD STOUT, DAVID L STOUT WILLIAM M. NAME NAME STREET ADDRESS 207 SENATE AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CAMP HILL PA TITLE ☐ Delete TITLE Change ☐ Addition NAME MOROSKY, DONALD G NAME STREET ADDRESS STREET ADDRESS 207 SENATE AVENUE CITY-ST-ZIP CAMP HILL PA CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

□ Delete

SIGNATURE: \_

KNEPP, LYNN E

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207 SENATE AVENUE

207 SENATE AVENUE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Change

☐ Addition

CR2E034 (9/01)