

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 13 1998 8:00am<sup>8</sup>  
Secretary of State

DOCUMENT # F95000005582 (0)

1. Corporation Name

ISDA FRATERNAL ASSOCIATION



Principal Place of Business

Mailing Address

419 WOOD ST  
PITTSBURGH PA 15222

419 WOOD ST  
PITTSBURGH PA 15222

3. Date Incorporated or Qualified

11/14/1995

4. FEI Number

25-1091698

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

FLORIDA INSURANCE COMMISSIONER  
CAPITOL BLDG  
TALLAHASSEE FL 32399-0300

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 617.0502 and 617.1508, 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 617.0503, 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  
NAME TAMMIA, PATRICK R  
STREET ADDRESS 406 KINGS HWY  
CITY-ST-ZIP CARNEGIE PA 15108 ☐ DELETE

TITLE V  
NAME CASTELLI, THOMAS  
STREET ADDRESS 326 GIRARD ST  
CITY-ST-ZIP JOHNSTOWN PA 15905 ☐ DELETE

TITLE C  
NAME MANZELLA, ANN  
STREET ADDRESS 1312 HAZLETT RD  
CITY-ST-ZIP PITTSBURGH PA 15237 ☐ DELETE

TITLE S  
NAME DONAHUE, JOSEPHINE  
STREET ADDRESS 9843 TOMAHAWK TRAIL  
CITY-ST-ZIP WEXFORD PA 15090 ☐ DELETE

TITLE D  
NAME BASSO, ANTHONY  
STREET ADDRESS 6110 KENNEDY AVE  
CITY-ST-ZIP HAMMOND IN 46323 ☐ DELETE

TITLE D  
NAME NAPLES, PASCAL  
STREET ADDRESS 1600 N. 20TH AVE  
CITY-ST-ZIP MELROSE PARK IL 60160 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 238 HEMLOCK RD  
2.4 CITY-ST-ZIP WYNNEWOOD, PA 19096

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS 1942 DUBONNET CT  
4.4 CITY-ST-ZIP ALLISON PARK, PA 15101

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ann Manzella*

Ann Manzella, Controller 7/2/98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date (12/2/98) Residing Phone # (412) 555-1500

CR2E037 (5/98)