

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90021 005 ***150.00

0619785 AT

DOCUMENT # 562259

1. Entity Name
MARONDA HOMES, INC. OF FLORIDA

Principal Place of Business

**11 TIMBERGLEN DR
 IMPERIAL PA 15126
 US**

Mailing Address

**11 TIMBERGLEN DR
 IMPERIAL PA 15126
 US**

2. Principal Place of Business

202 PARK WEST DR,

Suite, Apt. #, etc.

3. Mailing Address

202 PARK WEST DR.

Suite, Apt. #, etc.

City & State

PITTSBURGH, PA

Zip

15275

Country

US

City & State

PITTSBURGH, PA

Zip

15275

Country

US

4. FEI Number

25-1336949

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**VON DREELE, WAYNE J
 4005 MARONDA WAY
 SANFORD FL 32771**

7. Name and Address of New Registered Agent

Name

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

City

FL

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)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **CEO/D** ☐ Delete
 NAME **WOLF, WILLIAM J.**
 STREET ADDRESS **178 BACKBONE RD**
 CITY-ST-ZIP **SEWICKLEY PA**

TITLE **SD** ☐ Delete
 NAME **WOLF, RONALD W.**
 STREET ADDRESS **178 BACKBONE RD**
 CITY-ST-ZIP **SEWICKLEY PA**

TITLE **PD** ☐ Delete
 NAME **VON DREELE, WAYNE J**
 STREET ADDRESS **4005 MARONDA WAY**
 CITY-ST-ZIP **SANFORD FL 32771**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEO/D** ☒ Change ☐ Addition
 NAME **WOLF, WILLIAM J.**
 STREET ADDRESS **202 PARK WEST DRIVE**
 CITY-ST-ZIP **PITTSBURGH, PA 15275**

TITLE **VP/S/D** ☒ Change ☐ Addition
 NAME **WOLF, RONALD W.**
 STREET ADDRESS **202 PARK WEST DRIVE**
 CITY-ST-ZIP **PITTSBURGH, PA 15275**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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.

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director

Date

Daytime Phone #

CR2E034 (9/01)