

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

000760

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 578302

1. Corporation Name
JLI REALTY, INC.

Principal Place of Business

1501 ALCOA BLDG
PITTSBURGH PA 15219
US

Mailing Address

1501 ALCOA BLDG
PITTSBURGH PA 15219
US

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

04-22-1999 90067 025 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1978

4. FEI Number

59-1861706

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 201 Isabella Street

Suite, Apt. #, etc.

22

City & State

23 Pittsburgh, PA

Zip

Country

24 15212-5858

25

2a. Mailing Address

26 201 Isabella Street

Suite, Apt. #, etc.

27

City & State

28 Pittsburgh, PA

Zip

Country

29 15212-5858

30

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 | <input type="checkbox"/> DELETE |
| NAME | WINTER, J. M. | |
| STREET ADDRESS | 1501 ALCOA BLDG | |
| CITY-ST-ZIP | PITTSBURGH PA | |
| TITLE | V | <input checked="" type="checkbox"/> DELETE |
| NAME | ROBINSON, B. R. | |
| STREET ADDRESS | 1501 ALCOA BLDG | |
| CITY-ST-ZIP | PITTSBURGH PA | |
| TITLE | VP | <input type="checkbox"/> DELETE |
| NAME | LUCOT, J | |
| STREET ADDRESS | 1501 ALCOA BLDG | |
| CITY-ST-ZIP | PITTSBURGH PA 15219 | |
| TITLE | S | <input type="checkbox"/> DELETE |
| NAME | YURA, DOLORES A. | |
| STREET ADDRESS | 1501 ALCOA BUILDING | |
| CITY-ST-ZIP | PITTSBURGH PA | |
| TITLE | T | <input type="checkbox"/> DELETE |
| NAME | WENNEMER, R. G. | |
| STREET ADDRESS | 1501 ALCOA BLDG | |
| CITY-ST-ZIP | PITTSBURGH PA | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | JEREMIAH, B.S. | |
| STREET ADDRESS | 1501 ALCOA BLDG | |
| CITY-ST-ZIP | PITTSBURGH PA 15219 | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|--|
| 1.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | 201 Isabella Street |
| 1.4 CITY-ST-ZIP | Pittsburgh, PA 15212-5858 |
| 2.1 TITLE | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | Assistant Treasurer |
| 2.3 STREET ADDRESS | Jeffrey R. Hennion |
| 2.4 CITY-ST-ZIP | 201 Isabella Street |
| | Pittsburgh, PA 15212-5858 |
| 3.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | 201 Isabella Street |
| 3.4 CITY-ST-ZIP | Pittsburgh, PA 15212-5858 |
| 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | 201 Isabella Street |
| 4.4 CITY-ST-ZIP | Pittsburgh, PA 15212-5858 |
| 5.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | 201 Isabella Street |
| 5.4 CITY-ST-ZIP | Pittsburgh, PA 15212-5858 |
| 6.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | 201 Isabella Street |
| 6.4 CITY-ST-ZIP | Pittsburgh, PA 15212-5858 |

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, with all other like empowered.

SIGNATURE

SIGNATURE REQUIRED A. Yura-Secretary 4/13/99 (412) 553-2281

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)