

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 APR 11 PM 8:25

DOCUMENT # **831894** (1)  
1. Corporation Name  
**TRUMBULL CORPORATION**

Principal Place of Business Mailing Address  
**1020 LEBANON ROAD** **1020 LEBANON ROAD**  
**P.O. BOX 98100** **P.O. BOX 98100**  
**PITTSBURGH PA 15227** **PITTSBURGH PA 15227**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/26/1974** 3a. Date of Last Report **04/06/1994**  
4. FEI Number **25-1021993** 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  
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.  
22. City & State 27. City & State  
23. Zip Country 28. Zip Country  
24. Zip Country 29. Zip Country 30. Zip Country

9. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RAGO, MICHAEL J.</b>	1.2 NAME	
STREET ADDRESS	<b>891 FREDERICKA DRIVE</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>BETHEL PARK PA</b>	1.4 CITY - ST - ZIP	
TITLE	<b>DVT</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CLARK, STEPHEN M.</b>	2.2 NAME	
STREET ADDRESS	<b>1046 GRANDVIEW FARMS DR</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>BETHEL PARK PA</b>	2.4 CITY - ST - ZIP	
TITLE	<b>VD</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HECHT, ROBERT</b>	3.2 NAME	
STREET ADDRESS	<b>1743 HASTINGS MILL RD</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>PITTS PA</b>	3.4 CITY - ST - ZIP	
TITLE	<b>D</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DICK, LOUISE H.</b>	4.2 NAME	
STREET ADDRESS	<b>123 VILLAGE CT</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>PITTSBURGH PA</b>	4.4 CITY - ST - ZIP	
TITLE	<b>D</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ROWE, DIANE D.</b>	5.2 NAME	
STREET ADDRESS	<b>2119 BLAIRMONT DR.</b>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<b>PITTSBURGH PA</b>	5.4 CITY - ST - ZIP	
TITLE	<b>D</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HECHT, JANE S</b>	6.2 NAME	
STREET ADDRESS	<b>1743 HASTINGS MILL RD</b>	6.3 STREET ADDRESS	
CITY - ST - ZIP	<b>PITTSBURGH PA</b>	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE: *Sandra B. Northing* 4/4/95 (412) 462-9300  
DATE: \_\_\_\_\_