

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 832075

1. Entity Name

NATIONAL DEVELOPMENT CORPORATION OF FLORIDA

Principal Place of Business

4415 5TH AVE.  
PITTSBURGH PA 15213

Mailing Address

4415 5TH AVE.  
PITTSBURGH PA 15213

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**FILED**  
**Mar 21, 2001 8:00 am**  
**Secretary of State**

03-21-2001 90034 006 \*\*\*150.00

00027545



DO NOT WRITE IN THIS SPACE

4. FEI Number 25-1203385

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANSBACHER, LEWIS  
5150 BELFORT ROAD  
BUILDING 100  
JACKSONVILLE FL 32256

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BASKIN, SEYMOUR  
4415 FIFTH AVE.  
PITTSBURGH PA ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AVP  
MASON, MARTIN  
4415 FIFTH AVE.  
PITTSBURGH PA 15213 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P/D  
JAMES ALLEN  
1001 THIRD AVE W., SUITE 410  
BRADENTON FL 34205 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
KREUTZER, KAREN  
4415 FIFTH AVE.  
PITTSBURGH PA 15213 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V/AS ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
ROSSI, JAN  
4415 FIFTH AVE.  
PITTSBURGH PA 15213 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V/S/T  
WILLIAM BALSINGER  
4415 FIFTH AVE.  
PITTSBURGH PA 15213 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
CONNOR, DIANE G.  
4415 FIFTH AVE.  
PITTSBURGH PA 15213 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
KATHLEEN BELLINO  
4415 FIFTH AVE.  
PITTSBURGH PA 15213 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ASV  
CONNOR, DIANE  
4415 5TH AVE  
PITTSBURGH PA ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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.

SIGNATURE: Kathleen Bellino Kathleen Bellino 2/8/01 412-578-7828  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)