

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90021 007 ***150.00

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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**



01202006 No Chg-P CR2E034 (11/05)

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

**ALLEN, JAMES
1001 3RD AVE WEST
SUITE 600
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BASKIN, SEYMOUR
STREET ADDRESS	4415 FIFTH AVE.
CITY-ST-ZIP	PITTSBURGH, PA
TITLE	PD
NAME	ALLEN, JAMES
STREET ADDRESS	1001 THIRD AVE. W. SUITE 410
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	VAS
NAME	KREUTZER, KAREN
STREET ADDRESS	4415 FIFTH AVE.
CITY-ST-ZIP	PITTSBURGH, PA 15213
TITLE	VST
NAME	BALSINGER, WILLIAM
STREET ADDRESS	4415 FIFTH AVE.
CITY-ST-ZIP	PITTSBURGH, PA 15213
TITLE	V
NAME	BELLINO, KATHLEEN
STREET ADDRESS	4415 FIFTH AVE.
CITY-ST-ZIP	PITTSBURGH, PA 15213
TITLE	ASV
NAME	CONNOR, DIANE
STREET ADDRESS	4415 5TH AVE
CITY-ST-ZIP	PITTSBURGH, PA

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kathleen Bellino VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

412-578-7828