

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90364 012 ***150.00

DOCUMENT # 835173
 1. Entity Name ✓

DELLWOOD CORPORATION

Principal Place of Business	Mailing Address
520 N. SEMORAN BLVD. SUITE 230 ORLANDO, FL 32807 US	520 N. SEMORAN BLVD. SUITE 230 ORLANDO, FL 32807 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

Zip	Country	Zip	Country
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4. FEI Number	Applied For
25-0900825	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

A0070989

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SHELPMAN, KIMBERLY
 520 N. SEMORAN BOULEVARD
 ORLANDO, FL 32807

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE	P	<input type="checkbox"/> Delete
NAME	MCCAFFREY, CHARLES G III	
STREET ADDRESS	1006 OSAGE ROAD	
CITY - ST - ZIP	PITTSBURGH, PA 15243	
TITLE	V	<input type="checkbox"/> Delete
NAME	JUHA, ROBERT	
STREET ADDRESS	14 E. MALL PLAZA	
CITY - ST - ZIP	CARNEGIE, PA 15106	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	JABLONSKI, RAYMOND	
STREET ADDRESS	14 E. MALL PLAZA	
CITY - ST - ZIP	CARNEGIE, PA 15106	
TITLE	S	<input type="checkbox"/> Delete
NAME	PATRICK, STACEY	
STREET ADDRESS	14 E. MALL PLAZA	
CITY - ST - ZIP	CARNEGIE, PA 15106	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *R. M. Sullivan* **4-30-01** **279-9591**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/00)