2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2000 8:00 am
Secretary of State
02-26-2000 90078 006 ***150.00

DOCUMENT # 854840

1. Entity Name

P. J. DICK INCORPORATED

Principal Place of Business	Mailing Address
BOX 9860 PA 15227	P.O. BOX 9860 PITTSBURGH PA 15227-0060

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1020 LEBANON ROAD	P.O. BOX 98100
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WEST MIFFLIN, PA	City & State: PITTSBURGH, PA
Zip: 15122 Country: USA	Zip: 15227 Country: USA

4. FEI Number 25-1357716 ☐ 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
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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, 2000 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	STD CKARK, STEPHEN M. 1046 GRANDVIEW FARMS DR PITTSBURGH PA ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition CLARK, STEPHEN M.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HECHT, ROBERT G 1743 HASTINGS MILL RD PITTSBURGH PA ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2077 BLAIRMONT DR PITTSBURGH PA 15241
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HECHT, JANE D. 1243 HASTINGSMILLE RD PITTSBURGH PA ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2077 BLAIRMONT DR PITTSBURGH PA 15241
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROWE, DIANE B. 2119 BLAIRMONT PITTSBURGH PA ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 125 FROEBE RD VENETIA PA 15367
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROWE, CLIFFORD R. 2119 BLAIRMONT PITTSBURGH PA ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 125 FROEBE RD VENETIA PA 15367
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS COCCAGNA, DOMINIC R 1350 STOLTZ ROAD BETHEL PARK PA 15102 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

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: Dominic R. Coccagna DOMINIC R. COCCAGNA 02/17/00 (412) 462-9300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #