

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000001245

FILED  
Sep 16, 2002  
Secretary of State

Entity Name: INVESMART ADVISORS, INC.

## Current Principal Place of Business:

PENN CENTER WEST, BLDG. 6, STE. 211  
PITTSBURGH, PA 15276

## New Principal Place of Business:

## Current Mailing Address:

PENN CENTER WEST, BLDG. 6, STE. 211  
PITTSBURGH, PA 15276

## New Mailing Address:

FEI Number: 25-1859547

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BARTOSZEWICZ, JAMES  
Address: PENN CENTER WEST, BLDG. 6, STE. 211  
City-St-Zip: PITTSBURGH, PA 15276

Title: D ( ) Delete  
Name: GENSHEIMER, MARK R  
Address: PENN CENTER WEST, BLDG. 6, STE. 211  
City-St-Zip: PITTSBURGH, PA 15276

Title: D ( ) Delete  
Name: ECHAVARRIA, CHRISTIAN  
Address: PENN CENTER WEST, BLDG. 6, STE. 211  
City-St-Zip: PITTSBURGH, PA 15276

Title: S ( ) Delete  
Name: KENNEDY, CHARLEY  
Address: PENN CENTER WEST, BLDG. 6, STE. 211  
City-St-Zip: PITTSBURGH, PA 15276

Title: T ( ) Delete  
Name: BATTAGLIA, NICOLA  
Address: PENN CENTER WEST, BLDG. 6, STE. 211  
City-St-Zip: PITTSBURGH, PA 15276

Title: V ( ) Delete  
Name: MANGAN, LYNN  
Address: 312 PLUM STREET, SUITE 1200  
City-St-Zip: CINCINNATI, OH 45202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLA BATTAGLIA

T

09/16/2002

Electronic Signature of Signing Officer or Director

Date