## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Feb 28, 2006 8:00 am Secretary of State

DOCU 1. Entity Nam GENERA					02-28-2006 9	90012 047	7 ***150	1.00			
Principal Place of Business  300 SIXTH AVE. PITTSBURGH, PA 15222  Mailing Address  300 SIXTH AVE. PITTSBURGH, PA 15222			22			1   FE   78 A	18788 (1111 <b>68</b> 117 <b>88</b> 111 8811	:	0030		
Principal Place of Business     3. Mailing Address											
Suite, Apt. #, etc. Suite, Apt. #, etc.					02102006 Chg-P C			CR2E034	CR2E034 (11/05)		
City & Stat	6	City & State				4. FEI Number Applied F 25-1124574 Not Appli			plied For t Applicable		
Zip	Country	Zip	Count	try		5. Certificate of	of Status Desired		8.75 Add e Required		
	6. Name and Address of Current	Registered Agent			_	7. Name and	Address of New R	egistered Ag	ent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301				Name Street A	ame treet Address (P.O. Box Number is Not Acceptable)						
	:			City				FL	Zip Code	9	
8. The above the obligat SIGNATURE_	named entity submits this statement folions of registered agent.  , Signature, typed or printed name of registered agent.	·				ed agent, or both	n, in the State of Flo	rida. I am fai	miliar with,	and accept	
FiL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig Trust Fund Contr		icing -188		00 May Be ed to Fees			71 <b>15</b> , 17	—————————————————————————————————————	
10.	OFFICERS AND		11.		ı	ADDITIONS/	HANGES TO OFF	CERS AND D	IRECTORS	IŅ 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO DINICOLA, ROBERT J 300 SIXTH AVE. PITTSBURGH, PA 15222	Delete			300	EPH FORT SIXTH R TSBURGH			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS SANDER, JAMES 300 SIXTH AVE. PITTSBURGH, PA 15222				V R08 380	BERT HOMLER O SIXTH AVE TTSBURGH PA 15222			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Delete  LARRIMER, CURTIS J  300 SIXTH AVE. PITTSBURGH, PA 15222				~			_	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FOX, J K 300 SIXTH AVE PITTSBURGH, PA 15222	☐ Delete							Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						(	Change	Addition	
TITLE NAME "" STREET ADDRESS CITY-ST-ZIP -	N2'	Delete	STREE						Change	Addition	
	The second secon										

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 attactpoint with an address, with all other like empowered.

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SIGNATURE: 4

SIGNATURE AND TYPED OR R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CURTIS LARRIMER 21306 EXEC VP & CFO

412-288-4600 Daytime Phone #