## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9200000552 (1)

**ULTIMAR THREE DEVELOPMENT CORPORATION** 

Principal Place of Business

600 GRANT STREET, ROOM 1536

Mailing Address

600 GRANT STREET, ROOM 1536

## **FILED** Feb 19 1997 8:00am Secretary of State



PITTSBURGH PA 15219-4776		PITTSBURGH PA 15219-2703					
				3. Date Incorporated or Qualified 12/06/1992	3a. Date of Last 04/02/1996		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	A	pplied For
21		26			52-1801964		lot Applicable
Suite, Apt. #, etc 22		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stafe 23		City & State	<del>                                     </del>		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζφ	Country	Zip	Count	у	8. This corporation has liability for	irJangible tax under	s. 199.032,
24	25	29	30		1	Yes No	
	9. Name and Address of Curr			.1	10. Name and Address of New Re	gistered Agent	
	E PRENTICE-HALL CORPORAT	TON SYSTEM, INC.	8	Name			
1201 HAYS STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
	NE 105		ļ		· '		
TAI	LLAHASSEE FL 32301		8:	3			
			8	4 City		85 Zip	Code
			4	1 - 7		FL I	
11. Pursuant office or agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob-	0502 and 607.1508, Florida State ate of Florida Such change was digations of, Section 607.0505, F	utes, the abo authorized l lorida Statut	ve-named by the corp es.	corporation submits this statement for the population's board of directors. I hereby acceptions	ourpose of changing of the appointment a	its registered s registered
SIGNATURE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	Signature, typed or printed name of registered			gent signature	required when reinstating)	DATE	00 11 10
12.	PD	AND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICE	Change	
TITLE	FERRARA, A. E. J	☐ nereit	1.1 TITLE			∟ change	L Agaillon
NAME	600 GRANT STREET		1.2 NAMI				
STREET ADDRESS	PITTSBURGH PA		1	ET ADDRESS			
CHTY - ST - ZIP	VPD	DELETE	1.4 CITY			Chones	Addition
TITLE	HOWARD, THOMAS G.	☐ DETE IE	2.1 TIFLE			Change	Addition
NAME	6200 E. J. OLIVER BLVD.		2.2 NAM				
STREET ADORESS	FAIRFIELD AL			et address			
CITY - \$1 - ZIP	SD SD	Doute	2. 4 CITY				I Adelica
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME	STANTON, R.M.		3.2 NAM		1		
STREET ADDRESS	600 GRANT STREET PITTSBURGH PA			ET ADDRESS			
CITY-ST-ZIP	TD	DELETE		-ST-ZIP		T Channa	Addition
TITLE	STRUEBING, STEPHEN K.	₩ nerete	4.1 TITLE			Change	LJ Addition
NAME	ANA OPHART OTDECT		4. 2 NAM				
STREET ADDRESS	PITTSBURGH PA			et address			
CITY - ST - ZIP	DC DC	DELETE	4.4 CfTY			3 A I Channe	Addition
TITLE	PFIFFNER, H J		5.1 TITLE		Director and Contro	OTIET CHANGE	COMODA CEL
NAME	ANA ADALLE ATORET		5.2 NAM		M. R. Kuehn		
STREET ADDRESS	PITTSBURGH PA			ET ADDRESS	600 Grant Street		
CITY - ST - ZIP		Floriere	5.4 CITY		Pittsburgh, PA 152	19	A Alakka
TITLE	AS COARG D	☐ DELETE	6.1 T/TLE			Change	Addition
NAME	MALLICK, CRAIG D.		6.2 NAM				
STREET ADDRESS				ET ADORESS			
CITY-S1-ZIP	PITTSBURGH PA		6.4 CITY	-ST-ZIP	<u> </u>	····	****

I do hereby cert-fy 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

2/13/97

412/433-2882