

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90006 026 ***150.00

057341 AT

DOCUMENT # F92000000720

1. Entity Name

VACATION PROPERTIES, INC.

Principal Place of Business

**ONE MELLON BANK CENTER, SUITE 4850
PITTSBURGH PA 15258-0001**

Mailing Address

**ONE MELLON BANK CENTER
SUITE 772
PITTSBURGH PA 15258-0001
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-1306912

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

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, 2002 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

TITLE ☒ Delete
NAME **PCD**
STREET ADDRESS **WHITE, SHERMAN L**
CITY-ST-ZIP **ONE MELLON BANK CENTER, ROOM 1535
PITTSBURGH PA 15258**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **LARIMER, ALBERT N**
CITY-ST-ZIP **ONE MELLON BANK CENTER, ROOM 5325
PITTSBURGH PA 15258**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **LANGFORD, DON A**
CITY-ST-ZIP **ONE MELLON BANK CNTR ROOM 1535
PITTSBURGH PA 15258**

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **HEISER, JOSEPH P**
CITY-ST-ZIP **ONE MELLON BANK CNTR ROOM 4826
PITTSBURGH PA 15258**

TITLE ☒ Delete
NAME **AT**
STREET ADDRESS **SCIULLO, JOANNE E**
CITY-ST-ZIP **ONE MELLON BANK CENTER, ROOM 772
PITTSBURGH PA 15258**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **President**
STREET ADDRESS **J. David Thompson**
CITY-ST-ZIP **One Mellon Center, Room 1535
Pittsburgh, PA 15258-0001**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **One Mellon Center, Room 5325**
CITY-ST-ZIP **Pittsburgh, PA 15258-0001**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **One Mellon Center, Room 1525**
CITY-ST-ZIP **Pittsburgh, PA 15258-0001**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **One Mellon Center, Room 4826**
CITY-ST-ZIP **Pittsburgh, PA 15258-0001**

TITLE ☐ Change ☒ Addition
NAME **AT**
STREET ADDRESS **Joanne S. Huber**
CITY-ST-ZIP **One Mellon Center, Room 772
Pittsburgh, PA 15258-0001**

TITLE ☐ Change ☐ 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:

Joanne S. Huber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joanne S. Huber
Date

Date

Daytime Phone #

1/8/02 412-234-1334

10/9/01 057341



Attachment

807025
F92000000770

Mellon

Mellon Bank, N. A.
One Mellon Center, Room 772
Pittsburgh, PA 15258-0001

January 8, 2002

Division of Corporations
Uniform Business Report
P.O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

The following return(s) is enclosed:

2002 Annual Report

For the State of FL

The company filing this return is:

Vacation Properties, Inc.

A check in the amount of \$150.00 is enclosed.

Very truly yours,

Michelle M. Malone
Michelle M. Malone

Enclosure(s)

cc: Joanne S. Huber