

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003507

Entity Name
BKO INVESTMENTS, INC.

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90121 046 ***150.00

Principal Place of Business

001 3RD AVE. WEST
10
BRADENTON FL 34205

Mailing Address

4415 5TH AVE
PITTSBURGH PA 15213

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

25-1259865

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ALLEN, JAMES R
1001 3RD AVE W.
SUITE 410
BRADENTON FL 34205

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

1. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Delete
NAME	MCDONOUGH, DENICE	
STREET ADDRESS	4415 FIFTH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15213	
TITLE	VP	<input type="checkbox"/> Delete
NAME	ALLEN, RONALD J	
STREET ADDRESS	1001 3RD AVE. WEST, 410	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	V	<input type="checkbox"/> Delete
NAME	BALSINGER, WILLIAM E	
STREET ADDRESS	4415 5TH AVE	
CITY-ST-ZIP	PITTSBURGH PA 15213	
TITLE	VTS	<input type="checkbox"/> Delete
NAME	ALLEN, VIRGINIA	
STREET ADDRESS	1001 THIRD AVE. WEST, SUITE 410	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	PD	<input type="checkbox"/> Delete
NAME	ALLEN, VAMES	
STREET ADDRESS	1001 THIRD AVE. WEST, SUITE 410	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

3. 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: *Kathleen Bellino* Kathleen Bellino

1/31/02

412-578-7800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/01)