

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90050 023 ***150.00

0564722

DOCUMENT # F94000005997

1. Corporation Name

ASSOCIATED COMMUNICATIONS OF FLORIDA INC.

Principal Place of Business

200 GATEWAY TOWERS
PITTSBURGH PA 15222

Mailing Address

200 GATEWAY TOWERS
PITTSBURGH PA 15222

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/21/1994

4. FEI Number

51-0260858

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

BERKMAN, MONROE
ENTERPRISE PLAZA
201 E. KENNEDY BLVD, SUITE 1400
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE PD
NAME BERKMAN, MYLES P
STREET ADDRESS 200 GATEWAY TOWERS
CITY-ST-ZIP PITTSBURGH PA 15222

TITLE VD
NAME BERKMAN, DAVID J
STREET ADDRESS 3 BALA PLAZA EAST #502, MONUMENT & PRESIDENT
CITY-ST-ZIP BALA CYNWYD PA 19004

TITLE AS
NAME HARTMAN, KEITH C
STREET ADDRESS 200 GATEWAY TOWERS
CITY-ST-ZIP PITTSBURGH PA 15222

TITLE T
NAME BERKMAN, MYLES P
STREET ADDRESS 200 GATEWAY TOWERS
CITY-ST-ZIP PITTSBURGH PA 15222

TITLE D
NAME JONES, DONALD H
STREET ADDRESS 200 GATEWAY TOWERS
CITY-ST-ZIP PITTSBURGH PA 15222

TITLE D
NAME KATARINCIC, JOSEPH A
STREET ADDRESS ONE OXFORD CENTER, 32ND FLOOR
CITY-ST-ZIP PITTSBURGH PA 15219

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Myles P. Berkman, Director

Date

Daytime Phone #

CR2E034 (11/98)