

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # F95000003194

1. Corporation Name

MCCLURE SALES COMPANY, INC.

Principal Place of Business

435 BEBOUT ROAD  
VENETIA PA 15367

Mailing Address

435 BEBOUT ROAD  
VENETIA PA 15367

FILED

99 SEP 10 PM 1:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1995

4. FEI Number

25-1726682

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.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

TITLE	P	<input type="checkbox"/> DELETE
NAME	MCCLURE, ROBERT B	
STREET ADDRESS	110 MOORE DR.	
CITY-ST-ZIP	MCMURRAY PA 15317	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WILINSKI, ROBERT C	
STREET ADDRESS	37 POPLAR ST.	
CITY-ST-ZIP	CANONSBURG PA 15317	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	MCCLURE, ROBERT S	
STREET ADDRESS	112 MOORE DR.	
CITY-ST-ZIP	MCMURRAY PA 15317	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

500002987655-9  
-09/15/99-01051-1020  
\*\*\*\*150.00 \*\*\*\*150.00

14. 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 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.

SIGNATURE:

*Robert C Wilinski*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-25-99 724-941-5440

0121482

CR2E034 (5/99)



## Stelmack Jeffers & Dobransky, LLP

Certified Public Accountants

P.O. Box 62280  
Pittsburgh, PA 15241  
E-mail: [sjd@sgi.net](mailto:sjd@sgi.net)  
(724) 745-6600  
(724) 745-7202 Fax

2

Joseph S. Stelmack, CPA

Gary T. Jeffers, CPA

Joseph T. Dobransky, CPA

August 17, 1999

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: McClure Sales Company, Inc.  
EIN# 25-1726682

Dear Sir or Madam:

We are writing this letter on behalf of our client McClure Sales Company, Inc. The company missed the May 1, 1999 filing deadline for the Corporation Annual Report because their bookkeeper who maintains all of the tax filing records was fired in April of 1999. We assumed that the annual report was filed on time. We did not know that it was not until we received a second notice. We called the Florida Department of State and on their advice we are sending payment of \$150.00 which is the amount that would have been due if filed on time. The Company has never filed the Annual Report late in the past and we ask that you please waive the \$400.00 penalty and accept \$150.00 as payment in full.

If you have any questions, please feel free to call.

Sincerely,

**STELMACK JEFFERS & DOBRANSKY, LLP**

Joseph T. Dobransky, Partner

JTD/jlv  
enclosures

cc: Mr. Robert McClure