2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 08:00 AM
Secretary of State

DOCUMENT # F95000005906

1. Entity Name
GENCO I, INC.

Principal Place of Business
100 PAPERCRAFT PARK
PITTSBURGH, PA 15238

Mailing Address
100 PAPERCRAFT PARK
PITTSBURGH, PA 15238

03222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
25-1766580
Applied For
Not Applicable

5. *Certificate of Status Desired* ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GALLAGHER, MATTHEW J
3200 NW 125TH ST BAY 16
MIAMI, FL 33167

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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. *I am familiar with, and accept* the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	SCHOENEBERGER, LARRY M
STREET ADDRESS	100 PAPERCRAFT PARK
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	PCH
NAME	SHEAR, HERBERT S
STREET ADDRESS	100 PAPERCRAFT PARK
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	VP
NAME	ROADARMEL, RICHARD L
STREET ADDRESS	100 PAPERCRAFT PARK
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	S
NAME	SHEAR, BARBARA S
STREET ADDRESS	100 PAPERCRAFT PARK
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	D
NAME	SHEAR, GERALD
STREET ADDRESS	100 PAPERCRAFT PARK
CITY-ST-ZIP	PITTSBURGH, PA 15238
TITLE	D
NAME	SHEAR, HERBERT S
STREET ADDRESS	100 PAPERCRAFT PARK
CITY-ST-ZIP	PITTSBURGH, PA 15238

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03/30/05-80032-004 158.75

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12. 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 10 or Block 11 if* changed, or on an attachment with an address with all other like empowered.

SIGNATURE: CFO 03/22/2005 (412) 820 3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #