FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 03, 2001 8:00 am Secretary of State DOCUMENT # F9600000379 LEADER DATA PROCESSING INC. 04-03-2001 90031 014 ***150.00 Principal Place of Business Mailing Address PO BOX O DO SOX O HAZLETON PA 18201 HAZLETON PA 18201 UUUGOTOI 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 23-1693805 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 CD ☐ Change Addition TITLE Delete TITI F MASON, CHARLES J NAME NAME 1325 E CHESTNUT ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HAZLETON PA 18201 Change Addition TITLE ☐ Delete TITLE SCHNEIDER, GEORGE L NAME NAME 35 COLONY DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HAZLETON PA 18201 CITY-ST-ZIP SECRETARY TREASURER -- Change Addition CHARLES J. MASON JR 1325 E. CHESTNUT ST TITLE Delete STANCATO, FRANK P JR. NAME NAME 15 COVENTRY ROAD STREET ADDRESS STREET ADDRESS PA 18201 **DRUMS PA 18222** HAZLETON CITY-ST-7IP CITY-ST-ZIP ☐ Channe □ Addition TITLE ☐ Delete TITLE HORN, DAVID NAME NAME 2827 ROYSTON PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BEVERLY HILLS CA 90210 CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE NAME MATRICCINO, DANIEL NAME 3 COVENTRY ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DRUMS PA 18222** ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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:

CHARLES J. MASON / 3/28/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Dayling Phone #