

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000004019

1. Entity Name

IHC/SANTA MARIA CORPORATION

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90013 042 ***150.00

Principal Place of Business

Mailing Address

680 ANDERSEN DR.
 FOSTER PLAZA TEN
 PITTSBURGH PA 15220

680 ANDERSEN DR.
 FOSTER PLAZA TEN
 PITTSBURGH PA 15220-2700

2. Principal Place of Business

3. Mailing Address

1950 Stemmons Freeway

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 6001

same

City & State

City & State

Dallas Tx

same

Zip

Country

Zip

Country

75207

USA

same

same



DO NOT WRITE IN THIS SPACE

4. FEI Number 23-2913816

Applied For

Not Applicable

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

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

Name

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

City

FL

Zip Code

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)

DATE

9. 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, 2000 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DVT
 NAME RICHARDSON, J. WILLIAM
 STREET ADDRESS 680 ANDERSEN DR., FOSTER PLAZA TEN
 CITY-ST-ZIP PITTSBURGH PA 15220 ☐ Delete

TITLE President
 NAME Frederick J. Kleisner
 STREET ADDRESS 1950 Stemmons Freeway, Ste 6001
 CITY-ST-ZIP Dallas Tx 75207 ☒ Change ☐ Addition

TITLE AS
 NAME HUDAK, TIMOTHY Q
 STREET ADDRESS 680 ANDERSEN DR., FOSTER PLAZA TEN
 CITY-ST-ZIP PITTSBURGH PA 15220 ☐ Delete

TITLE VP & Treasurer
 NAME Richard L. Mahoney
 STREET ADDRESS same as above
 CITY-ST-ZIP same as above ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE VP & Secretary
 NAME Carla S. Moreland
 STREET ADDRESS same as above
 CITY-ST-ZIP same as above ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE Asst. Secretary
 NAME Beverly M. Houston
 STREET ADDRESS same as above
 CITY-ST-ZIP same as above ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/00

Date

214 863 1000

Daytime Phone #

CE 1014 (9/99)