DOCÜMENT # F9800000594 1. Entity Name PENNS LANDING SUPPLY COMPANY				•	FILEU SEURLIARY OF STATE FISION OF CERPORATION		
				•			
			4 37 - 4 4 4		03 JAN 27 PM 2: 04		
Principal Place 4545 CAMPBELL PITTSBÜRGH P	LS RUN RD.		lailing Address 1545 CAMPBELLS RUN RD. PITTSBURGH PA 15205				
Principal Place of Business 3. Mailing Address				·	PARAMETER NO. 6	2	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		HEINSTATEMENT 02-03		
City & State			City & State		4. FEI Number 25-1427519 Applied For Not Applicable		
Zip	Co	ountry	Zip	Country	5. Certificate of Status Desired \$8.75 Addition Fee Required	onal	
	6 Name and	Address of Current Reg	istered Agent		7. Name and Address of New Registered Agent		
	- 0, Name 4134		 	Name			
1200 SOU	ORATION SYS TH PINE ISLAN			Street Addre	ess (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324				City	City FL Zip Code		
the obligati	ions of registered	agent. Ited name of registered agent and to satisfy its Intangible	title if applicable. (NOT	E: Registered Agent signature re	10 Flootion Campaign Financing \$5.00	May Be	
Tax filing r	requirement and ria on back)	elects to do so.	After September 13 Make Check Paya	3, 2002 Fee will be \$ ble to Department of	Trust Fund Contribution. Added to Added to		
11.		OFFICERS AND DIF		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	INI 11	
TITLE	PSD WYATT, RICH		☐ Delete	TITLE		IN 11 ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	4545 CAMPB	ells run RD.	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	50000900781 6 11/14/020109 <u>1001_***i50.00</u>	Addition	
STREET ADDRESS CITY-ST-ZIP	4545 CAMPB PITTSBURGH	ells run RD.	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	.,60 <u>0</u> 00 <u>9</u> 007816	Addition	
STREET ADDRESS	4545 CAMPB PITTSBURGH VD WYATT, AAR	ells run RD. PA 15205 DN W Ells run RD.		NAME STREET ADDRESS CITY-ST-ZIP	500003007816 11/14/02-01091-001_**150.01 Change	Addition Addition	
STREET ADDRESS CITY-ST-ZIPTITLE NAME STREET ADDRESS CITY-ST-ZIPTITLE TITLE NAME	4545 CAMPB PITTSBURGH VD WYATT, AAR 4545 CAMPB PITTSBURGH V EPISCOPO, I	PA 15205 ON W ELLS RUN RD. PA 15205 REDERICK T		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	500009007816 11/14/02-01091-001_**150.00 change change	Addition Addition O. DC Addition	
STREET ADDRESS CITY-ST-ZIP -TITLENAME STREET ADDRESS CITY-ST-ZIP - TITLE	4545 CAMPB PITTSBURGH VD WYATT, AAR 4545 CAMPB PITTSBURGH V EPISCOPO, I	ELLS RUN RD. PA 15205 ON W ELLS RUN RD. PA 15205 REDERICK T ELLS RUN RD.	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	500009007816 11/14/02-01091-001_**150.00 change	Addition Addition O. DC Addition	
STREET ADDRESS CITY-ST-ZIP -TITLE NAME STREET ADDRESS CITY-ST-ZIP -TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	4545 CAMPB PITTSBURGH VD WYATT, AAR 4545 CAMPB PITTSBURGH V EPISCOPO, I 4545 CAMPB PITTSBURGH S GROSJEAN, 4545 CAMPB	ELLS RUN RD. PA 15205 ON W ELLS RUN RD. PA 15205 REDERICK T ELLS RUN RD. I PA 15205 JAMES IELLS RUN RD.	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	500009007816 11/14/02-01091-001_**150.00 change change	Addition Addition Addition Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	4545 CAMPB PITTSBURGH VD WYATT, AAR 4545 CAMPB PITTSBURGH V EPISCOPO, I 4545 CAMPB PITTSBURGH S GROSJEAN,	ELLS RUN RD. PA 15205 ON W ELLS RUN RD. PA 15205 REDERICK T ELLS RUN RD. I PA 15205 JAMES IELLS RUN RD.	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	500009007816 11/14/02-01091-001_**150.00 change	Addition Addition Addition Addition	

CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling 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 facturate 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 of trustee empoyered a secute 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 the information 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 factor of the corporation or the receiver of trustee empoyers of the corporation of th

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

REQUIRED

Delete

10/30/02 Date

412 - 787 - 5600

Change