

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000002769

1. Entity Name

RICHARD KING MELLON FOUNDATION, INC.

(R)

**FILED**  
**Aug 15, 2000 8:00 am**  
**Secretary of State**

08-15-2000 90007 040 \*\*\*\*61.25

Principal Place of Business

PO BOX 690  
LIGONIER PA 15658

Mailing Address

PO BOX 690  
LIGONIER PA 15658

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

25-1127705

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

SPIELVOGEL, LEONARD  
101 SO. COURTENAY PARKWAY, STE. 201  
MERRITT ISLAND FL 32952-4855

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

**FILE NOW: FEE IS \$61.25**  
**After September 13, 2000 min. will be \$236.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME MELLON, SEWARD P  
STREET ADDRESS ROUTE 381 - ROLLING ROCK FARMS  
CITY-ST-ZIP LIGONIER PA 15658

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

TITLE V ☐ Delete  
NAME WATSON, MICHAEL  
STREET ADDRESS ROUTE 381 - ROLLING ROCK FARMS  
CITY-ST-ZIP LIGONIER PA 15658

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

TITLE S ☐ Delete  
NAME IZZO, SCOTT D  
STREET ADDRESS ROUTE 381 - ROLLING ROCK FARMS  
CITY-ST-ZIP LIGONIER PA 15658

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

TITLE T ☐ Delete  
NAME BURR, ROBERT B JR  
STREET ADDRESS RT 381 ROLLING ROCK FARMS  
CITY-ST-ZIP LIGONIER PA 15658

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

TITLE C ☐ Delete  
NAME MELLON, RICHARD P  
STREET ADDRESS ROUTE 381 - ROLLING ROCK FARMS  
CITY-ST-ZIP LIGONIER PA 15658

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

TITLE VC ☐ Delete  
NAME WALSH, MASON JR  
STREET ADDRESS ROUTE 381 - ROLLING ROCK FARMS  
CITY-ST-ZIP LIGONIER PA 15658

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

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 617, 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:

*Michael J. Watson* (MICHAEL WATSON)

8/10/00

(724) 238-1820

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)