2003 NOT-FOR-PROFIT CORPORATION

Mailing Address

LIGONIER PA 15658

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

PO BOX 690

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000002769

1. Entity Name

PO 80X 690

LIGONIER PA 15658

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

richard King	MELLON	FOUNDATION,	INC.
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Apr 28, 2003 8:00 am § Secretary of State

04-28-2003 90293 045 ****61.25

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1 545/644 (110 1010) 1011 4010 144/1 4010 4010 A	IAN TINGK INNAN NIKAN KAKANAN
CHECK HERE IF MAKING	G CHANGES
4. FEI Number 25-1127705	Applied For
25 1121100	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
7. Name and Address of New Registered	Agent
de que la comi nación de la cominación	

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

Country

6. Name and Address of Current Registered Agent

7. Name and Addre	7. Name and Address of New Registered Agent			
Name		7,000-		
Street Address (P.O. Box Number is No	t 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. I am familiar with, and accept the obligations of registered agent.

Country

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

9. Election Campaign Financing

\$5.00 May Be

Make Check Payable to

		must Fund Co	irinbudon.	Ч	Added to Fees	Florida Department of	State
10.	OFFICERS AND DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	MELLON, SEWARD P		NAME				
STREET ADDRESS	ROUTE 381 - ROLLING ROCK FARMS		STREET ADDRESS	5			ĺ
CITY-ST-ZIP	LIGONIER PA 15658		CITY-ST-ZIP	_			
TITLE	v	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	WATSON, MICHAEL		NAME				J
	ROUTE 381 - ROLLING ROCK FARMS		STREET ADDRESS	3			
CITY-ST-ZIP	LIGONIER PA 15658		CITY-ST-ZIP		<u> </u>		
TITLE	S	☐ Delete	TITLE		•	☐ Change	☐ Addition
NAME	IZZO, SCOTT D		NAME				
STREET ADDRESS	ROUTE 381 - ROLLING ROCK FARMS		STREET ADDRESS	3			
CITY-ST-ZIP	LIGONIER PA 15658		CITY-ST-ZIP				
TITLE	T	☐ Delete	TITLE			☐ Change	☐ Addition ☐
NAME	BURR, ROBERT B JR		NAME				
STREET ADDRESS	RT 381 ROLLING ROCK FARMS		STREET ADDRESS	3			ļ
CITY-ST-ZIP	LIGONIER PA 15658		CITY-ST-ZIP	_			
TITLE	C	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	MELLON, RICHARD P		NAME				}
	ROUTE 381 - ROLLING ROCK FARMS		STREET ADDRESS	3			
CITY-ST-ZIP	LIGONIER PA 15658		CITY-ST-ZIP				
TITLE	VC	☐ Delete	TITLE	1		Change	☐ Addition
NAME	LAWERENCE, BUSCH		NAME				(
	RT 381 ROLLINGS ROCK CARMS		STREET ADDRESS	5			i
CITY_ST_7IP	LICANICO DA 45050		CITY_ST_7IP	1			I

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:

Shure Ollentere S. Busch

April 24, 2003 (724)238-667]