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FILED

May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H43234 (4)

1. Corporation Name
EISENHOWER BOULEVARD ASSOCIATES, INC.

Principal Place of Business

C/O EMC 300 6TH AVENUE
8TH FLOOR
PITTSBURG PA 15222
US

Mailing Address

C/O EMC 6TH AVENUE
8TH FLOOR
PITTSBURG PA 15222
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 PITTSBURGH, PA

24 Zip Country

25. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 PITTSBURGH, PA

29 Zip Country

3. Date Incorporated or Qualified
02/14/1985

3a. Date of Last Report
04/03/1996

4. FEI Number

59-2700728

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

1201 HAYS STREET

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	PAULDINE, DAVID J	
STREET ADDRESS	1799 S.E. 17TH STREET	
CITY - ST - ZIP	FT LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KNUTSON, ROBERT B.	
STREET ADDRESS	300 SIXTH AVENUE	
CITY - ST - ZIP	PITTSBURGH PA	
TITLE	VAST	<input type="checkbox"/> DELETE
NAME	CYPITER, ROBERT	
STREET ADDRESS	300 SIXTH AVENUE	
CITY - ST - ZIP	PITTSBURGH PA	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	WEINGART, GREGORY A	
STREET ADDRESS	600 GRANT STREET, 42ND FLOOR	
CITY - ST - ZIP	PITTSBURGH PA	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	O'DAY, DANIEL R.	
STREET ADDRESS	300 SIXTH AVENUE	
CITY - ST - ZIP	PITTSBURGH PA	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	PRY, GEORGE L.	
STREET ADDRESS	300 6TH AVENUE	
CITY - ST - ZIP	PITTSBURGH PA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	VS
2.3 STREET ADDRESS	STEINBERG, FREDERICK W.
2.4 CITY - ST - ZIP	300 SIXTH AVENUE, 8TH FLOOR PITTSBURGH, PA
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	V
3.3 STREET ADDRESS	CYPHER, ROBERT
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	T
5.3 STREET ADDRESS	MCDOWELL, ROBERT T.
5.4 CITY - ST - ZIP	300 SIXTH AVENUE, 8TH FLOOR PITTSBURGH, PA
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FREDERICK W. STEINBERG 4-28-97 (412) 562-0900

Date

Daytime Phone

CR2E034 (9/96)