## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HUBERT

SIGNATURE:

## Jul 29, 2003 8:00 am **Secretary of State** J52734 **DOCUMENT#** 07-29-2003 90053 001 \*\*\*450.00 M & J MARINA DEVELOPMENT CORP. Principal Place of Business Mailing Address 147 DELTA DR. 147 DELTA DR. 55052677 PITTSBURGH PA 15238 PITTSBURGH PA 15238 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 25-1542365 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCCLURE, ROBERT W Street Address (P.O. Box Number is Not Acceptable) 500 FIFTH AVE S STE 509 NAPLES FL 34102 City Zip Code 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. TITLE TITLE ☐ Change ☐ Addition CR2E034 (10/02) ☐ Delete DELLIGATTI, JAMES A. NAME NAME 147 DELTA DRIVE. STREET ADDRESS STREET ADDRESS PITTSBURGH PA CITY-ST-ZIP CITY-ST-ZIP TITLE ۷D Delete TITLE ☐ Change Addition DELLIGATTI, MICHAEL J. NAME NAME 147 DELTA DRIVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PITTSBURGH PA CITY-ST-ZIP TITLE - -Delete: TITLE Change Addition HUBERT, DANIEL E. NAME NAME STREET ADDRESS 147 DELTA DRIVE. STREET ADDRESS CITY-ST-ZIP PITTSBURGH PA CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 10 or Block 11 if

**FILED**