


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 29 1998 8:00am
Secretary of State

* PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J70410 (2) 1. Corporation Name NATIONAL DEVELOPMENT PROPERTIES OF FLORIDA, INC.					
Principal Place of Business 4415 FIFTH AVE. PITTSBURGH PA 15213			Mailing Address 4415 FIFTH AVE. PITTSBURGH PA 15213		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/28/1987 4. FEI Number 59-2825019 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent ANSBACHER, LEWIS 4215 SOUTHPOINT BLVD SUITE 100 JACKSONVILLE FL 32216			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BASKIN, SEYMOUR		1.2 NAME	Cheryl Sassard	
STREET ADDRESS	4415 5TH AVE AT DITHRIDG		1.3 STREET ADDRESS	4215 Southpoint Blvd, Suite 100	
CITY-ST-ZIP	PITTSBURGH PA		1.4 CITY-ST-ZIP	Jacksonville, FL 32216	
TITLE	DP	<input type="checkbox"/> DELETE	2.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALLEN, JAMES R.		2.2 NAME	Diane G. Connor	
STREET ADDRESS	4415 5TH AVE AT DITHRIDG		2.3 STREET ADDRESS	4415 Fifth Ave	
CITY-ST-ZIP	PITTSBURGH PA		2.4 CITY-ST-ZIP	Pittsburgh, PA 15213	
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE	AVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KAMIN, MARVIN		3.2 NAME	Martin Mason	
STREET ADDRESS	4415 5TH AVE AT DITHRIDG		3.3 STREET ADDRESS	4415 Fifth Ave	
CITY-ST-ZIP	PITTSBURGH PA		3.4 CITY-ST-ZIP	Pittsburgh, PA 15213	
TITLE	VST	<input type="checkbox"/> DELETE	4.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BALSINGER, WILLIAM		4.2 NAME	Karen Kreutzer	
STREET ADDRESS	4415 FIFTH AVE.		4.3 STREET ADDRESS	4415 Fifth Ave	
CITY-ST-ZIP	PITTSBURGH PA		4.4 CITY-ST-ZIP	Pittsburgh, PA 15213	
TITLE	VAS	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELLINO, KATHLEEN		5.2 NAME		
STREET ADDRESS	4415 FIFTH AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	PITTSBURGH PA		5.4 CITY-ST-ZIP		
TITLE	AS	<input checked="" type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CELIGOI, LINDA		6.2 NAME		
STREET ADDRESS	4415 FIFTH AVE.		6.3 STREET ADDRESS		
CITY-ST-ZIP	PITTSBURGH PA 15213		6.4 CITY-ST-ZIP		

14. 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 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 _____ 4/21/98 (412) 770-7800

CR2E034 (10/97)