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

PROFIT CORPORATION ANNUAL REPORT

1999

PITTSBURGH PA 15258

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90140 045 ***150.00

DOCUN 1. Corporation	MENT # M8235()									
	LAND COMPANY, INC.										
Principal Place	of Business	М	lailing Address								
ONE MELLON BANK CENTER			ONE MELLON BANK CENTER								
ROOM 772			ROOM 772				DO NOT MO	TE IN TURC (SDACE		
PITTSBURGH PA 15258-0001			PITTSBURGH PA 15258-0001				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
							05/24/1988				
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		Ap	plied For	
21			26				<u>25-1576030</u>			t Applicable	4
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & State			City & State				6. Election Campaign Financing 55.00 May Be				
23			28				Trust Fund Contribution Added to Fees				
Zip	p Country		Zip Cou				8. This corporation owes the curr	ent year Inta	ngible		
24	25	29	30				Personal Property Tax.		☐ Yes	□ k Nο	_
•	9. Name and Address of Curre	nt Regis	stered Agent				10. Name and Address of New F	Registered A	gent		4
000	DODATION CEDUCE COMBANY	,		81	Name	•					
CORPORATION SERVICE COMPANY FOWLER & CLARK, P.A.				82 Street			s (P.O. Box Number is Not Accepta	able)			_
	EAST PARK AVENUE		0.5							-	
TALLAHASSEE FL 32301				83							
, , , <u>, , , , , , , , , , , , , , , , </u>		84 City				FL	85 Zip	Code			
11. Pursuant	to the provisions of Sections 607.050)2 and 6	307.1508, Florida Statutes, th	e above	-namec	corpor	ation submits this statement for the	DUIDORA OF S	hanging its	registered	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Flori	da. Such change was author	ized by	tne com	oration	's board of directors. I hereby accer	ot the appoin	tment as re	gistered	
Ŭ	Translat With and doopt the obliga		, ••••								
SIGNATURE	Signature, typed or printed name of registered age	nt and title	if applicable. (NOTE: Regis	tered Ager	t signature	required v	vhen reinstating)	DATE			4
12.	OFFICERS AI	ND DIRI		13. .1 TITLE			ADDITIONS/CHANGES TO OF	FICERS ANI	DIRECTO	DRS IN 12	_
TITLE	DCP DELETE								Cloude		"
NAME	WHITE, SHERMAN L.										
STREET ADDRESS				1.3 STREET ADDRESS							
CITY-ST-ZIP	PITTSBURGH PA 15258			1.4 CITY- ST- ZIP 2.1 TITLE				 	Change	☐ Additio	<u>,</u>
TITLE	VP DELETE BRANDSTATTER, JOHN F										
NAME	ACON ONE MELLON DANIK OFNITED				2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS	DITTODUDOU DA 45050			2.4 CITY-ST-ZIP							ļ
CITY-ST-ZIP	AT			1.1 TITLE	n-ur	+			Change	Additio	'n
NAME	LANSINGER, MARK P.			.2 NAME							
STREET ADDRESS	772 ONE MELLON BANK CTR			3.3 STREET ADDRESS		,					ļ
CITY-ST-ZIP	PITTSBURGH PA 15258			8.4. CITY-5							
TITLE	S			.1 TITLE		15	ecretary		Change	Additio	n]
NAME	WHITEMAN, BARBARA J			4 2 NAME							
STREET ADDRESS	CORP. CAND. LANG. COLUMNIA CENTER			4.3 STREET ADDRESS			as one mellon to	ank G	ን .		ĺ
CITY-ST-ZIP	PITTSBURGH PA 15258			4 CITY-S	T-ZiP	$\perp \rho$	Hoburah PA 1	5as8.	0001		\perp
TITLE	T		☐ DELETE 5	.1 TITLE						Additio	n
NAME	TAYLOR, S. LYNN			5.2 NAME		Vic	Ki B. Parnell 45 One Mellon B	. .			
STREET ADDRESS	740 ONE MELLON BANK CEN	TER	5	i.3 STREE	ADDRESS	i ag	45 Une Mellon D	ank Ct	γ,		1

6.4 CITY-ST-ZIP 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

☐ Addition