

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90006 023 ***150.00

DOCUMENT # M82350

1. Entity Name

LUCIEN LAND COMPANY, INC.

Principal Place of Business

**ONE MELLON BANK CENTER
ROOM 772
PITTSBURGH PA 15258-0001**

Mailing Address

**ONE MELLON BANK CENTER
ROOM 772
PITTSBURGH PA 15258-0001**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

25-1576030

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
FOWLER & CLARK, P.A.
502 EAST PARK AVENUE
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DCP	<input checked="" type="checkbox"/> Delete
NAME	WHITE, SHERMAN L.	
STREET ADDRESS	1535 ONE MELLON CENTER	
CITY-ST-ZIP	PITTSBURGH PA 15258	
TITLE	AT	<input checked="" type="checkbox"/> Delete
NAME	SCIOLLO, JOANNE E	
STREET ADDRESS	772 ONE MELLON CENTER	
CITY-ST-ZIP	PITTSBURGH PA 15258-0001	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HEISER, JOSEPH E	
STREET ADDRESS	772 ONE MELLON CENTER	
CITY-ST-ZIP	PITTSBURGH PA 15258-0001	
TITLE	T	<input type="checkbox"/> Delete
NAME	LARIMEIR, ALBERT N	
STREET ADDRESS	4502 ONE MELLON CENTER	
CITY-ST-ZIP	PITTSBURGH PA 15258-0001	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	J. David Thompson	
STREET ADDRESS	One mellon Center, Room 1535	
CITY-ST-ZIP	Pittsburgh, PA 15258-0001	
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joanne S. Huber	
STREET ADDRESS	One mellon Center, Room 772	
CITY-ST-ZIP	Pittsburgh, PA 15258-0001	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joseph P. Heiser	
STREET ADDRESS	One mellon Center, Room 4826	
CITY-ST-ZIP	Pittsburgh, PA 15258-0001	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	One mellon Center, Room 5325	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joanne S. Huber* **Joanne S. Huber** 1-802 412-234-1334

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)



Attachment

807028

Doc # M82350

Mellon

Mellon Bank, N. A.
One Mellon Center, Room 772
Pittsburgh, PA 15258-0001

January 8, 2002

Division of Corporations
Uniform Business Report
P.O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

The following return(s) is enclosed:

2002 Annual Report

For the State of FL

The company filing this return is:

Lucien Land Company, Inc.

A check in the amount of \$150.00 is enclosed.

Very truly yours,

Michelle M. Malone

Michelle M. Malone

Enclosure(s)

cc: Joanne S. Huber