

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M97000000140

1. Entity Name

ECKERT SEAMANS CHERIN & MELLOTT, LLC

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90078 008 ****50.00

956643



DO NOT WRITE IN THIS SPACE

Principal Place of Business

600 GRANT STREET, 44TH FLOOR
PITTSBURGH PA 15219-2788

Mailing Address

600 GRANT STREET, 44TH FLOOR
PITTSBURGH PA 15219-2788

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

25-1056909

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LATIMER, HENRY
450 EAST LAS OLAS BLVD., STE 800
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

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

Jaqueline N. Cooper

(NOTE: Registered Agent signature required when reinstating)

4/26/2002

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LATIMER, HENRY 450 EAST LAS OLAS BLVD., STE 800 FT LAUDERDALE FL 33301 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TUNGATE, DAVID E. 600 GRANT STREET, 44TH FLOOR PITTSBURGH, PA 15219 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DELINSKY, STEPHEN R ONE INTERNATIONAL PLACE BOSTON MA 02110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VERALDI, DENNIS L 600 GRANT STREET, 44TH FLOOR PITTSBURGH PA 15219-2788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SWEENEY, THOMAS J 600 GRANT STREET, 44TH FLOOR PITTSBURGH PA 15219-2788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WIEDMAN, RICHARD S 600 GRANT STREET, 44TH FLOOR PITTSBURGH PA 15219-2788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RYAN, TIMOTHY P. 600 GRANT STREET, 44TH FLOOR PITTSBURGH, PA 15219 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

CR2E083 (9/01)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Richard S. Wiedman* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/23/2002 (412) 566-5967

Date

Daytime Phone #