

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # M97000000140

1. Entity Name

ECKERT SEAMANS CHERIN & MELLOTT, LLC



Principal Place of Business

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

Mailing Address

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



02202004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

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

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	TUNGATE, DAVID E
STREET ADDRESS	600 GRANT ST 44TH FLOOR
CITY- ST- ZIP	PITTSBURGH, PA 15219
TITLE	MGRM
NAME	DELINSKY, STEPHEN R
STREET ADDRESS	ONE INTERNATIONAL PLACE
CITY- ST- ZIP	BOSTON, MA 02110
TITLE	MGRM
NAME	VERALDI, DENNIS L
STREET ADDRESS	600 GRANT STREET, 44TH FLOOR
CITY- ST- ZIP	PITTSBURGH, PA 152192788
TITLE	MGRM
NAME	SWEENEY, THOMAS J
STREET ADDRESS	600 GRANT STREET, 44TH FLOOR
CITY- ST- ZIP	PITTSBURGH, PA 152192788
TITLE	MGRM
NAME	WIEDMAN, RICHARD S
STREET ADDRESS	600 GRANT STREEST, 44TH FLOOR
CITY- ST- ZIP	PITTSBURGH, PA 152192788
TITLE	MGRM
NAME	RYAN, TIMOTHY P
STREET ADDRESS	600 GRANT ST 44TH FLOOR
CITY- ST- ZIP	PITTSBURGH, PA 15219

UC-0000137181
04/29/04-60030-005 50.00

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IN THIS SPACE**

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:

Dennis L Veraldi

3/04/04

412-566-5982

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

Date

Daytime Phone #