

**CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northingham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

1999 JUN 17 AM 9:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01084
1. Corporation Name
IT CORPORATION OF CALIFORNIA

(3)

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/02/1984

4. FBI Number
94-1258053

5. Certificate of Status Desired ☐ \$8.75 Addic
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May I
Added to Fee

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 **2790 Mosside Blvd.**
Suite, Apt. #, etc.

2a. Mailing Address

26 **2790 Mosside Blvd.**
Suite, Apt. #, etc.

22 City & State
Monroeville, PA

27 City & State
Monroeville, PA

23 Zip Country
15146 USA

28 Zip Country
15146 USA

9. Name and Address of Current Registered Agent

**CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324**

81 Name

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

83 **000002814450--8**

84 City **06/24/99 01077-005**
*****150.00 ***PU190.00** Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regi
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 regi
agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **VP**
STREET ADDRESS **RICE, FRANK C.**
CITY-ST-ZIP **23456 HAWTHORNE BLVD.**
TORRANCE CA

TITLE ☒ DELETE
NAME **OCKLEMAN, PHILLIP H.**
STREET ADDRESS **23456 HAWTHORNE BLVD.**
CITY-ST-ZIP **TORRANCE CA**

TITLE ☐ DELETE
NAME **KIRK, JAMES G**
STREET ADDRESS **2790 MOSSIDE BLVD**
CITY-ST-ZIP **MONROEVILLE PA**

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **DELUCA, ANTHONY J**
CITY-ST-ZIP **23456 HAWTHORNE BLVD**
HAWTHORNE CA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1

1.1 TITLE ☒ Change ☐
1.2 NAME
1.3 STREET ADDRESS **2790 Mosside Boulevard**
1.4 CITY-ST-ZIP **Monroeville, PA 15146**

2.1 TITLE ☒ Change ☐
2.2 NAME **T**
2.3 STREET ADDRESS **Richard R. Conte**
2.4 CITY-ST-ZIP **2790 Mosside Boulevard**
Monroeville, PA 15146

3.1 TITLE ☒ Change ☐
3.2 NAME
3.3 STREET ADDRESS **2790 Mosside Boulevard**
3.4 CITY-ST-ZIP **Monroeville, PA 15146**

4.1 TITLE ☒ Change ☐
4.2 NAME
4.3 STREET ADDRESS **2790 Mosside Boulevard**
4.4 CITY-ST-ZIP **Monroeville, PA 15146**

5.1 TITLE ☐ Change ☐
5.2 NAME
5.3 STREET ADDRESS

6.1 TITLE ☐ Change ☐
6.2 NAME
6.3 STREET ADDRESS
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 inform
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
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
Block 12 or Block 13 if checked, or upon attaching my signature.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

412/372-7701

Date: Daytime Phone: 0825

AD



Janice W. Shapiro
Direct Dial (412) 380-6202
Fax No. (412) 858-3997
e-mail: jshapiro@itcrp.com

IT Corporation

2790 Mosside Boulevard
Monroeville, PA 15146-2792
Tel. 412.372.7701
Fax. 412.373.7135

A Member of The IT Group

June 15, 1999

VIA FEDERAL EXPRESS

Mr. Andy Dunlap
Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

RE: 1999 Annual Report

Dear Andy:

Pursuant to our conversation today, enclosed please find the second submission of the 1999 Annual Report pertaining to IT Corporation. I have also enclosed a copy of my original letter to the Corporations Division explaining the delinquency of the filing. Finally, I have enclosed another check in the amount of \$150.00 to cover the filing fee.

I will call you tomorrow to ensure receipt of this package and ensure prompt processing in order to be able to obtain a good standing certificate. I truly appreciate your assistance and understanding in this matter. Should you have any questions or require any additional information, please do not hesitate to contact me at the above-listed phone number. Again, thank you.

Very truly yours,

Janice W. Shapiro
Paralegal

Enclosures