

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01722

1. Entity Name

THE PENNSYLVANIA GROUP, INCORPORATED

FILED
Jul 17, 2000 8:00 am
Secretary of State

07-17-2000 90072 027 ***550.00

Principal Place of Business

Mailing Address

515 SHOEMAKER ROAD
KING OF PRUSSIA PA 19406-3599
US

515 SHOEMAKER ROAD
KING OF PRUSSIA PA 19406-3599

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2390363

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☐ Delete
NAME MAC CART, ALFRED A.
STREET ADDRESS 515 SHOEMAKER ROAD
CITY-ST-ZIP KING OF PRUSSIA PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME BUFORD JR, ANTHONY A
STREET ADDRESS 515 SHOEMAKER ROAD
CITY-ST-ZIP KING OF PRUSSIA PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME BUFORD III, ANTHONY A
STREET ADDRESS 515 SHOEMAKER ROAD
CITY-ST-ZIP KING OF PRUSSIA PA

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: *Alfred A. MacCart*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

734 (1111)

attachment
... Doc# PD1722
D0068889

MORRIS J. COHEN & CO., P.C.

1601 Market Street, Suite 2525

Philadelphia, PA 19103

(215) 567-8000

www.mjcco.com

Type of return	Uniform Business Report (UBR)
For the Year ended:	2000
Prepared for:	The Pennsylvania Group, Incorporated
Amount due	\$550.00
Make check payable to:	Department of State
Mail return and check (if applicable) to:	Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500
Return must be filed on or Before	Immediately
Additional instructions	Please sign, title, and date form at the bottom of page 1.