

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
Jun 07, 2000 8:00 am
Secretary of State

06-07-2000 90005 022 ***150.00

DOCUMENT # P07045

1. Corporation Name

M & J MANAGEMENT PITTSBURGH, INC.

Principal Place of Business

**147 DELTA DRIVE
PITTSBURGH PA 15238**

Mailing Address

**147 DELTA DRIVE
PITTSBURGH PA 15238**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1985

4. FEI Number

25-1200758

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 **30**

9. Name and Address of Current Registered Agent

**M & J MARINA DEVELOPMENT CORP.
1399 BANANA RIVER DRIVE
INDIAN HARBOUR BEACH FL 32937-4489**

10. Name and Address of New Registered Agent

81 Name

ROBERT W. MCCLURE

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

25040 GOLDCREST DRIVE

83

84 City

BONITA SPRINGS

FL

85 Zip Code

33923

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-28-00

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD**

STREET ADDRESS **DELLIGATTI, MICHAEL J.**

CITY-ST-ZIP **147 DELTA DRIVE**

PITTSBURGH PA

TITLE ☐ DELETE

NAME **SVD**

STREET ADDRESS **DELLIGATTI, JAMES A.**

CITY-ST-ZIP **147 DELTA DRIVE**

PITTSBURGH PA

TITLE ☐ DELETE

NAME **T**

STREET ADDRESS **HUBERT, DANIEL E.**

CITY-ST-ZIP **147 DELTA DRIVE**

PITTSBURGH PA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DANIEL E. HUBERT, TREASURER

Date

Daytime Phone #

3/7/00