

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90052 023 ***150.00

DOCUMENT # P15722

1. Entity Name
PERDIDO LAND DEVELOPMENT CO., INC.



Principal Place of Business
ATTN: SECRETARY
600 GRANT STREET, ROOM 1538
PITTSBURGH PA 15219-1776

Mailing Address
ATTN: SECRETARY
600 GRANT STREET, ROOM 1538
PITTSBURGH PA 15219-1776



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 **25-1555123**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
#105
TALLAHASSEE FL 32301

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **MOLLER, P**
STREET ADDRESS **600 GRANT STREET**
CITY-ST-ZIP **PITTSBURGH PA**

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

TITLE **VPD** ☐ Delete
NAME **HOWARD, T J**
STREET ADDRESS **600 GRANT ST**
CITY-ST-ZIP **PITTSBURGH PA 76**

TITLE ☒ Change ☐ Addition
NAME **HOWARD, T G**
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **C** ☐ Delete
NAME **MCNALLY, W P**
STREET ADDRESS **600 GRANT STREET**
CITY-ST-ZIP **PITTSBURGH PA**

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

TITLE **ASD** ☐ Delete
NAME **PEPPERNEY, KENNETH R**
STREET ADDRESS **600 GRANT ST**
CITY-ST-ZIP **PITTSBURGH PA 76**

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

TITLE **S** ☐ Delete
NAME **MALLICK, CD**
STREET ADDRESS **600 GRANT ST**
CITY-ST-ZIP **PITTSBURGH P 76**

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

TITLE **TD** ☐ Delete
NAME **STRUEBING, S K**
STREET ADDRESS **600 GRANT STREET**
CITY-ST-ZIP **PITTSBURGH PA 15219**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/03
Date

Daytime Phone #

CR2E034 (10/02)