

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P17684** (2)

1. Corporation Name

WEIGHCO OF FLORIDA, INCORPORATED



Principal Place of Business

Mailing Address

**2120. ONE MELLON BANK CENTER
PITTSBURG PA 15219**

**2120. ONE MELLON BANK CENTER
PITTSBURG PA 15219**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/15/1988

3a. Date of Last Report

04/20/1995

4. FEI Number

25-1563232

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

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 must always be stamped

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	SDP			<input type="checkbox"/>
	PEACOCK, D. GRANT	107 HAWTHORNE ROAD	PITTSBURGH PA	
	D			<input type="checkbox"/>
	SPRAGUE, WILLIAM	203 FOXHURST DRIVE	PITTSBURGH PA	
	TD			<input checked="" type="checkbox"/>
	NICHOLSON, WILLIAM B	46 FARLEY ROAD	SHORT HILLS NJ 07078	
	D			<input type="checkbox"/>
	BURKE, CHARLES R.	402 BUCKINGHAM RD	PITTSBURGH PA	
	D			<input type="checkbox"/>
	FINEGOLD, ELIZABETH A	5722 AYLESBORO ROAD	PITTSBURGH PA	
	D			<input type="checkbox"/>
	BEARD, FREDERICK K	132 SOUTH DRIVE	PITTSBURGH PA	

13.

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
	DC																						
	PEACOCK, D. GRANT	107 HAWTHORNE ROAD	PITTSBURGH PA																				
	PT																						
	MCSORLEY, RICHARD J.	3300 FRENCH WOODS ROAD	CHARLOTTE, NC 28269																				
	D																						
	WILEY, S. DONALD	132 RIDING TRAIL LANE	PITTSBURGH, PA 15215																				
	D																						
	SHEETZ, E. F., JR.	300 HAMPTON ROAD	PITTSBURGH, PA 15215																				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96

412-288-9190

CR2E034 (12/95)