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FILED
May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P24323 (8)
1. Corporation Name
LAPLACE LAND COMPANY

Principal Place of Business
RM 772 ONE MELLON BANK CENTER
PITTSBURGH PA 15258

Mailing Address
RM 772 ONE MELLON BANK CENTER
PITTSBURGH PA 15258-0001



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

3. Date Incorporated or Qualified
05/15/1989

3a. Date of Last Report
04/19/1996

4. FEI Number

74-2374589

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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDC ☐ DELETE

NAME HOLL, RICHARD L.
STREET ADDRESS 4850 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA

TITLE VT ☐ DELETE

NAME TAYLOR, S. LYNN
STREET ADDRESS 2945 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA

TITLE S ☐ DELETE

NAME WHITEMAN, BARBARA J.
STREET ADDRESS 1820 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA

TITLE V ☐ DELETE

NAME BRANDSTATTER, JOHN F
STREET ADDRESS 4850 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA

TITLE S ☐ DELETE

NAME WHITEMAN, BARBARA J.
STREET ADDRESS ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA

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

Pittsburgh, PA 15258-0001

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

740 One Mellon Bank Center
Pittsburgh, PA 15258-0001

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

15258-0001

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

15258-0001

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

1820 One Mellon Bank Center
15258-0001

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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.

SIGNATURE: Mark P. Laplace 4/12/97 4/12 2346-1082

CR2E034 (9/96)