

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90201 015 ***150.00

DOCUMENT # P24323

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/15/1989

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 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

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

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

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 WHITE, SHERMAN L
STREET ADDRESS 1535 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA 15258

TITLE VT ☒ DELETE

NAME TAYLOR, S. LYNN
STREET ADDRESS 740 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA 15258

TITLE S ☒ DELETE

NAME WHITEMAN, BARBARA J.
STREET ADDRESS 1820 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA 15258

TITLE V ☐ DELETE

NAME BRANDSTATTER, JOHN F
STREET ADDRESS 1535 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA 15258

TITLE S ☒ DELETE

NAME WHITEMAN, BARBARA J.
STREET ADDRESS 1820 ONE MELLON BANK CENTER
CITY-ST-ZIP PITTSBURGH PA 15258

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

Vice President

Vicki K. Parnell

2945 One Mellon Bank Ctr.

Pittsburgh, PA 15258-0001

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Secretary

Joseph P. Weiser

4826 One Mellon Bank Center

Pittsburgh, PA 15258-0001

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Pittsburgh, PA 15258-0001

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Asst. Treasurer

Mark P. Lansinger

722 One Mellon Bank Ctr.

Pittsburgh, PA 15258-0001

6.1 TITLE

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, 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

Date

Daytime Phone #

Mark P. Lansinger 3/11/99 412-234-6083

CR2E034 (11/98)