

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90420 049 ***150.00

DOCUMENT # P24323

1. Entity 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**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
One Mellon Center

3. Mailing Address
One Mellon Center

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Room 772

Room 772

City & State
Pittsburgh, PA

City & State
Pittsburgh, PA

Zip
15258-0001

Country
US

Zip
15258-0001

Country
US

4. FEI Number **74-2374589**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 **P** ☐ Delete
NAME **THOMPSON, J. DAVID**
STREET ADDRESS **1 MELLON CENTER, ROOM 1535**
CITY-ST-ZIP **PITTSBURGH PA 15258-0001**

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

TITLE **VP** ☐ Delete
NAME **LARIMER, ALBERT N**
STREET ADDRESS **1 MELLON CENTER, ROOM 5325**
CITY-ST-ZIP **PITTSBURGH PA 15258-0001**

TITLE ☒ Change ☐ Addition
NAME **Larimer, Albert N.**
STREET ADDRESS **Pittsburgh, PA 15258-0001**
CITY-ST-ZIP

TITLE **SEC** ☐ Delete
NAME **HEISER, JOSEPH P.**
STREET ADDRESS **1 MELLON CENTER, ROOM 4826**
CITY-ST-ZIP **PITTSBURGH PA 15258-0001**

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

TITLE **AT** ☐ Delete
NAME **HUBER, JOANNE S**
STREET ADDRESS **1 MELLON CENTER, ROOM 772**
CITY-ST-ZIP **PITTSBURGH PA 15258-0001**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joanne S. Huber
Assistant Treasurer

Date

Daytime Phone #

1/7/03
912-234-1334

CR2E034 (10/02)



Attachment #
P24323
30006594

Mellon

Mellon Bank, N. A.
One Mellon Center, Room 772
Pittsburgh, PA 15258-0001

January 7, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

The following return(s) is enclosed:

2003 Annual Report

For the State of FL

The company filing this return is:

LaPlace Land Company

A check in the amount of \$150.00 is enclosed.

Very truly yours,

Michelle M. Malone

Michelle M. Malone

Enclosure(s)

cc: Joanne S. Huber