

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 16, 2000 8:00 am  
Secretary of State

02-16-2000 90009 030 \*\*\*150.00

DOCUMENT # P29457

1. Entity Name

PROPERTIES OF EAST FLORIDA INC.

Principal Place of Business

Mailing Address

HOLL, RICHARD L  
RNE MELLON BANK CENTER ROOM 4850  
PITTSBURGH PA 15258  
US

ALQUIST, VIRGINIA  
LEGAL AFFAIRS 8TH FLOOR 1735 MARKET STREET  
PHILADELPHIA PA 19103  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-2604957

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPC  
WHITE, SHERMAN L.  
1535 ONE MELLON BANK CENTER  
PITTSBURGH PA 15258-0001 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
JOYCE, DENNIS M.  
1535 ONE MELLON BANK CENTER  
PITTSBURGH PA 15258 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☒ Addition  
Pittsburgh, PA 15258-0001

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
POPKO, KENNETH H  
1535 ONE MELLON BANK CENTER  
PITTSBURGH PA 15258-0001 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
ALQUIST, VIRGINIA E.  
1735 MARKET STREET  
PHILADELPHIA PA 19101 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
LANSINGER, MARK P.  
772 ONE MELLON BANK CENTER  
PITTSBURGH PA 15258 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
Joanne E. Scivillo  
One Mellon Bank Center, Room 772  
Pittsburgh, PA 15258-0001 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joanne E. Scivillo  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-00

Date

412-234-1334

Daytime Phone #

CR2E034 (9/99)