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

(4)

**THE STOLLE CORPORATION**

| Principal Place of Business               | Mailing Address                              |
|-------------------------------------------|----------------------------------------------|
| 1501 MICHIGAN ST<br>SIDNEY OH 45365<br>US | 1501 ALCOA BLDG<br>PITTSBURGH PA 15219<br>US |

|                                       |                     |                            |                     |
|---------------------------------------|---------------------|----------------------------|---------------------|
| <b>2. Principal Place of Business</b> |                     | <b>2a. Mailing Address</b> |                     |
| <b>21</b>                             | Suite, Apt. #, etc. | <b>26</b>                  | Suite, Apt. #, etc. |
| <b>22</b>                             | City & State        | <b>27</b>                  | City & State        |
| <b>23</b>                             | Zip                 | <b>28</b>                  | Zip                 |
| <b>24</b>                             | Country             | <b>29</b>                  | Country             |

|                                                                                                                                                                |  |                                              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|--|
| 3. Date Incorporated or Qualified<br><b>08/21/1990</b>                                                                                                         |  | 3a. Date of Last Report<br><b>04/07/1995</b> |  |
| 4. EIN Number<br><b>31-0459490</b>                                                                                                                             |  | Applied For<br>No: Applicable                |  |
| 5. Certif. date of Status Desired <input type="checkbox"/>                                                                                                     |  | <b>\$8.75</b> Additional<br>Fee Required     |  |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                             |  | <b>\$5.00</b> May Be<br>Added to Fees        |  |
| 8. This corporation has liability for intangible tax under s. 199.032,<br>Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |                                              |  |
| 10. Name and Address of New Registered Agent                                                                                                                   |  |                                              |  |

| 9. Name and Address of Current Registered Agent                                                |  | 10. Name and Address of New Registered Agent |                                                    |           |
|------------------------------------------------------------------------------------------------|--|----------------------------------------------|----------------------------------------------------|-----------|
| <b>C T CORPORATION SYSTEM</b><br><b>1200 S. PINE ISLAND ROAD</b><br><b>PLANTATION FL 33324</b> |  | <b>81</b>                                    | Name                                               |           |
|                                                                                                |  | <b>82</b>                                    | Street Address (P.O. Box Number is Not Acceptable) |           |
|                                                                                                |  | <b>83</b>                                    |                                                    |           |
|                                                                                                |  | <b>84</b>                                    | City                                               | <b>FL</b> |

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

Several of the most important of the above factors related to the

$$(N_1)_{\mathbb{R}} := \{x \in \mathbb{R}^{n_1} \mid \exists \lambda \in \mathbb{R}^{n_1} \text{ s.t. } x = \sum_{i=1}^{n_1} \lambda_i v_i\} \subseteq \mathbb{R}^{n_1} \text{ is the real span of } \{v_i\}_{i=1}^{n_1}.$$

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| 12. OFFICERS AND DIRECTORS |                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                     |
|----------------------------|----------------------|-------------------------------------------------------|---------------------------------------------------------------------|
| TITLE                      | PD                   | 1. TITLE                                              | See Attached Sheet                                                  |
| NAME                       | DIEDERICH, J L       | 1.2 NAME                                              |                                                                     |
| STREET ADDRESS             | 1501 ALCOA BLDG      | 1.3 STREET ADDRESS                                    |                                                                     |
| CITY - ST - ZIP            | PITTSBURGH FL        | 1.4 CITY - ST - ZIP                                   |                                                                     |
| TITLE                      | V                    | 2.1 TITLE                                             | See Attached Sheet                                                  |
| NAME                       | BURKE, L B           | 2.2 NAME                                              |                                                                     |
| STREET ADDRESS             | 1501 ALCOA BLDG      | 2.3 STREET ADDRESS                                    |                                                                     |
| CITY - ST - ZIP            | PITTSBURGH FL        | 2.4 CITY - ST - ZIP                                   |                                                                     |
| TITLE                      | S                    | 3.1 TITLE                                             | See Attached Sheet                                                  |
| NAME                       | YURA, D A            | 3.2 NAME                                              |                                                                     |
| STREET ADDRESS             | 1501 ALCOA BLDG      | 3.3 STREET ADDRESS                                    |                                                                     |
| CITY - ST - ZIP            | PITTSBURGH FL        | 3.4 CITY - ST - ZIP                                   |                                                                     |
| TITLE                      | T                    | 4.1 TITLE                                             | T<br>Holloway, C.E.<br>1501 Alcoa Building<br>Pittsburgh, PA 15219  |
| NAME                       | HOLLOW, C. E         | 4.2 NAME                                              |                                                                     |
| STREET ADDRESS             | 1501 ALCOA BLDG      | 4.3 STREET ADDRESS                                    |                                                                     |
| CITY - ST - ZIP            | PITTSBURGH FL        | 4.4 CITY - ST - ZIP                                   |                                                                     |
| TITLE                      | V                    | 5.1 TITLE                                             | See Attached Sheet                                                  |
| NAME                       | NICHOLS, W G         | 5.2 NAME                                              |                                                                     |
| STREET ADDRESS             | 1501 ALCOA BLDG      | 5.3 STREET ADDRESS                                    |                                                                     |
| CITY - ST - ZIP            | PITTSBURGH PA        | 5.4 CITY - ST - ZIP                                   |                                                                     |
| TITLE                      | VP                   | 6.1 TITLE                                             | AT<br>Robinson, B.W.<br>1501 Alcoa Building<br>Pittsburgh, PA 15219 |
| NAME                       | SNYDER, D. R         | 6.2 NAME                                              |                                                                     |
| STREET ADDRESS             | 1501 MICHIGAN STREET | 6.3 STREET ADDRESS                                    |                                                                     |
| CITY - ST - ZIP            | SIDNEY OH            | 6.4 CITY - ST - ZIP                                   |                                                                     |

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: L. B. Burke L. B. Burke-Vice President 4/11/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(11)

$$\{f_{j_1, j_2, \dots, j_n} \in \mathcal{F}_n : \sum_{i=1}^n j_i = n\}$$

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THE STOLLE CORPORATION

OFFICERS

| TITLES              | NAME            | BUSINESS ADDRESS                          |
|---------------------|-----------------|-------------------------------------------|
| PRESIDENT           | J. L. DIEDERICH | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |
| VICE PRESIDENT      | L. B. BURKE     | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |
| VICE PRESIDENT      | W. G. NICHOLS   | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |
| SECRETARY           | D. A. YURA      | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |
| TREASURER           | C. E. HOLLOWAY  | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |
| ASSISTANT TREASURER | B. W. ROBINSON  | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |

DIRECTORS

|          |                 |                                           |
|----------|-----------------|-------------------------------------------|
| DIRECTOR | J. L. DIEDERICH | 1501 ALCOA BUILDING, PITTSBURGH, PA 15219 |
|----------|-----------------|-------------------------------------------|