

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90136 005 ***150.00

DOCUMENT # P31655

1. Entity Name

OPCO, INC.

Principal Place of Business

500 ARCH ST.
WILLIAMSON PA 17705
US

Mailing Address

500 ARCH ST.
WILLIAMSON PA 17705
US

00040796



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

c/o Tax dept
Suite, Apt. #, etc.
500 Arch St

3. Mailing Address

c/o Tax dept
Suite, Apt. #, etc.
500 Arch St

City & State

Williamsport PA

City & State

Williamsport, PA

Zip

17705

Country

USA

Zip

17705

Country

USA

4. FEI Number 23-2621202

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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, 2001 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

TITLE PTD
NAME LARGEN, JOSEPH D. ☐ Delete
STREET ADDRESS 500 ARCH ST.
CITY-ST-ZIP WILLIAMSPORT PA

TITLE CFOS
NAME UZUPIS, STEVEN ☐ Delete
STREET ADDRESS 500 ARCH ST
CITY-ST-ZIP WILLIAMSON PA

TITLE CD
NAME BRODY, ARTHUR ☐ Delete
STREET ADDRESS 990 HIGHLAND DR
CITY-ST-ZIP SOLANA BEACH CA

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE CFOS
NAME UZUPIS, STEVEN ☒ Change ☐ Addition
STREET ADDRESS 500 ARCH ST
CITY-ST-ZIP WILLIAMSPORT PA 17705

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven Uzupis,
CFO/Sec

4-17-01

Date

570-326-2461

Daytime Phone #

CR2E034 (10/00)