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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P34230

CORNERSTONE CONSTRUCTION & MATERIALS, INC.

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD

**PLANTATION FL 33324** 

## Principal Place of Business Mailing Address C/O HANSON N. AMERICA ONE OXFORD CENTRE C/O HANSON N. AMERICA ONE OXFORD CENTRE STE 300 **STE 3000** DO NOT WRITE IN THIS SPACE PITTSBURGH PA 15218 PITTSBURGH PA 15219 3. Date Incorporated or Qualified 06/07/1991 2. Principal Place of Business 4. FEI Number 2a. Mailing Address 75-2227331 21 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State \$5.00 May Be 6, Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes

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

**B3** 

Name

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 it applicable. (NOTE Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.1 TITLE		Change	Addition
NAME	CRAIG C. SERGEANT		1.2 NAME			
STREET ADDRESS	ONE OXFORD CENTRE, STE 3000		1.3 STREET ADDRESS			
CITY-ST-ZIP	PITTSBURGH PA		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE		Change	Addition
NAME	BLUNDON, JILL M		2.2 NAME			
STREET ADDRESS	436 SEVENTH AVE #1050		23 STREET ADDRESS	One Oxford Centre, Suite	3000	
CITY-ST-ZIP	PITTSBURGH PA		2. 4 CITY-ST-ZIP	Pittsburgh, PA 15219		
TITLE	T	DELETE	31 TITLE	Treasurer	Change	Addition
NAME	Keith D. Terreri		3.2 NAME	Michael J. Donahue		
STREET ADDRESS	ONE OXFORD CENTRE, STE 3000		3.3 STREET ADDRESS	One Oxford Centre, Suite	3000	
DITY-ST-ZIP	PITTSBURGH PA		3.4. CITY - ST - ZIP	Pittsburgh, PA 15219		
TITLE	AS	DELETE	4.1 TITLE		Change	Addition
NAME	Karanzas, sally m		4. 2 NAME			
STREET ADDRESS	436 SEVENTH AVE #1050		4.3 STREET ADDRESS	One Oxford Centre, Suite	3000	
CITY-ST-ZIP	PITTSBURGH PA		4.4 CITY-ST-ZIP	Pittsburgh, PA 15219		
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			ľ
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME	, ·		1
STREET ADDRESS			6.3 STREET ADDRESS			
_			■ .			

14. Thereby 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 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 oreceiver 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:

Vice President 4/7/98 (412) 208-8845

**FILED** 

Apr 14 1998 8:00am

Secretary of State

10, Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

Applied For

Fee Required

☐ No

Not Applicable