## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 06, 2002 8:00 am § Secretary of State DOCUMENT # P39698 1. Entity Name TRIVERSITY CORPORATION 03-06-2002 90133 013 \*\*\*150.00 Mailing Address Principal Place of Business 311 SINCLAIR ST 311 SINCLAIR ST **BRISTOL PA 19007 BRISTOL PA 19007** 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 23-2329088 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent. THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1261 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **9.** This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 ☐ Delete ☐ Change ☐ Addition TITLE TITI F THOMAS, DAVID NAME NAME STREET ADDRESS 311 SINCLAIR ST STREET ADDRESS **BRISTOL PA 19007** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE AUUSLANDER, JOSHUA NAME NAME 311 SINCLAIR ST STREET ADDRESS STREET ADDRESS **BRISTOL PA 19007** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE-Delete: THOMAS, DAVID NAME NAME STREET ADDRESS 311 SINCLAIR ST STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP BRISTOL PA 19007 ☐ Change Addition TITLE ☐ Delete TITLE THOMAS, DAVID NAME NAME STREET ADDRESS 311 SINCLAIR ST STREET ADDRESS CITY-ST-ZIP **BRISTOL PA 19007** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition ENGLAND, DONALD NAME STREET ADDRESS 311 SINCLAIR ST STREET ADDRESS CITY-ST-ZIP **BRISTOL PA 19007** CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition WOLF, PETER NAME NAME STREET ADDRESS 311 SINCLAIR ST STREET ADDRESS CITY-ST-ZIP **BRISTOL PA 19007** 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

SIGNATURE