

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000000311

1. Entity Name

JLH SERIES I, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90219 002 ***158.75

Principal Place of Business

3655 CORTEZ RD W
 STE 110
 BRADENTON FL 34210
 US

Mailing Address

3655 CORTEZ RD W
 STE 110
 BRADENTON FL 34210-3147
 US

2. Principal Place of Business

311 CASTLE SHANNON BLVD

3. Mailing Address

311 CASTLE SHANNON BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pittsburgh, PA

City & State

Pittsburgh, PA

Zip

15234

Country

USA

Zip

15234

Country

USA

4. FEI Number

65-0369120

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LERITAN, DANIEL
 16831-D ISLE OF PALMS DR
 DELRAY BEACH FL 33484

7. Name and Address of New Registered Agent

Name Charles F. Johnson III

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

822 11th Street West

City

Bradenton

FL

Zip Code 34205

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO LERITAN, DANIEL 3655 CORTEZ RD. W STE 110 BRADENTON FL 34210	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CALLAHAN, DARRYL 3655 CORTEZ RD W, STE. 110 BRADENTON FL 34210	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CONARD, BETTY A 3655 CORTEZ RD. W., STE. 110 BRADENTON FL 34210	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP CONARD, BETTY A 1604 71st Street NW BRADENTON, FL 34209	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO/Pres Robert C. Lohr 311 Castle Shannon Blvd Pittsburgh, PA 15234	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/00 412-341-4500

CR2E034 (9/99)