FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 29, 2002 8:00 am Secretary of State DOCUMENT # S36160 1. Entity Name? 01-29-2002 90037 016 ***150 APU CYPRESS SPRINGS, INC. Principal Place of Business Mailing Address ONE MELLON BANK CENTER ONE MELLON BANK CENTER **ROOM 772 ROOM 772** PITTSBURGH PA 15258-0001 PITTSBURGH PA 15258-0001 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 25-1653923 Not Applicable Zip Country Country \$8.75 Additional 5.- Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE DCP Delete Addition TITLE ☐ Change NAME WHITE, SHERMAN L NAME Mellon Center, Roovingh, PA 15258 STREET ADDRESS 1535 ONE MELLON CENTER STREET ADDRESS CITY-ST-ZIP PITTSBURGH PA 15258-0001 CITY-ST-ZIP TITLE Delete TITLE NAME NAME LARIMER, ALBERT N Mellon Center, Room 5325 STREET ADDRESS STREET ADDRESS **4502 ONE MELLON CENTER** CITY-ST-7/P PITTSBURGH PA-15258-0001 CITY-ST-ZIP TITLE Delete TITLE ☐ Change AT . Toanne S. Huber NAME NAME SCIULLO, JOANNE E e mellon, Center, STREET ADDRESS 772 ONE MELLON CENTER STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15258-000 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME HEISER, JOSEPH P STREET ADDRESS STREET ADDRESS **4826 ONE MELLON CENTER** CITY-ST-ZIP PITTSBURGH PA 15258-0001 CITY-ST-7IP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME LANGFORD, DON A STREET ADDRESS STREET ADDRESS **1525 ONE MELLON CENTER** CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15258-0001 TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.



Mellon

<u>536160</u> 300735

Mellon Bank, N. A. One Mellon Center, Room 772 Pittsburgh, PA 15258-0001

January 6, 2002
Division of Corporations Uniform Business Report P.O. Box 1500 Tallahassee, FL 32302-1500
Gentlemen:
The following return(s) is enclosed:
2002 Annual Report
For the State of FL
The company filing this return is:
APU Cypress Springs, Inc.
A check in the amount of \$150.00 is enclosed.
Very truly yours,
Michellem. Malone
Michelle M. Malone
Enclosure(s)

Joanne S. Huber

cc: