

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 29, 2001 8:00 am**  
**Secretary of State**  
01-29-2001 90170 004 \*\*\*150.00

**DOCUMENT # S36162**

1. Entity Name  
**APD CHIMNEY LAKES, INC.**

Principal Place of Business  
**4850 ONE MELLON BANK CTR.  
PITTSBURGH PA 15258-0001**

Mailing Address  
**ONE MELLON BANK CENTER  
ROOM 772  
PITTSBURGH PA 15258-0001  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **25-1652977**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP WHITE, SHERMAN L. 1535 ONE MELLON BANK CENTER PITTSBURGH PA 15258-0001	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POPKO, KENNETH H 1535 ONE MELLON BANK CENTER PITTSBURGH PA 15258-0001	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PARNELL, VICKI K 5325 ONE MELLON BANK CTR. PITTSBURGH PA 15258-0001	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SCIVILLO, JOANNE E 772 ONE MELLON BANK CTR. PITTSBURGH PA 15258-0001	<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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1535 One Mellon Center	
VP Don A. Langford 1535 One Mellon Center	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Albert W. Larimer 4502 One Mellon Center	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Scivillo, Joanne E 772 One Mellon Center	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<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:

*Joanne E. Scivillo JE Scivillo*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/01  
Date

412-234-1334  
Daytime Phone #

CR2E034 (10/00)



Finance Department

805097  
DOC # 836162

January 12, 2001

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Gentlemen:

The following return(s) is enclosed:

2001 Annual Report

For the State of FL

The company filing this return is:

APD Chimney Lakes, Inc.

A check in the amount of \$150.00 is enclosed.

Very truly yours,

A handwritten signature in cursive script that reads 'Michelle M. Malone'.

Michelle M. Malone

Enclosure(s)

cc: Joanne E. Scullo

Tax Group

Room 772 • One Mellon Center • Pittsburgh, PA 15258-0001

A Mellon Financial Resource<sup>SM</sup>