

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # S36183**

1. Entity Name

APU CROSS CREEK, INC.**FILED**
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90025 028 ***150.00

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

4. FEI Number **25-1653922**Applied For
Not Applicable

Zip

Country

Zip

Country

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
POPKA, KENNETH W
1535 ONE MELLON BANK CENTER
PITTSBURGH PA 15258 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Kenneth W. Popko ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
PARRELL, VICKI K
2945 ONE MELLON BANK CENTER
PITTSBURGH PA 15258 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vicki K. Parnell
5325 One Mellon Bank Ctr. ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HEISER, JOSEPH
4826 ONE MELLON BANK CENTER
PITTSBURGH PA 15258 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
LANSINGER, MARK P
772 ONE MELLON BANK CENTER
PITTSBURGH PA 15258 ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
Joanne E. Scivillo
772 One Mellon Bank Ctr.
Pittsburgh, PA 15258-0001 ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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 #