

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S36184

1. Entity Name

APU CHIMNEY LAKES, INC.

FILED

Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90170 001 ***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
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 25-1653926	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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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 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1535 One Mellon Center Pittsburgh, PA 15258-0001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POPKO, KENNETH W 1535 ONE MELLON BANK CENTER PITTSBURGH PA 15258-0001 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Don A. Langford 1525 One Mellon Center Pittsburgh, PA 15258-0001 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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	T Albert D. Larimer 4502 One Mellon Center Pittsburgh, PA 15258-0001 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SCIVILLO, JOANNE E 772 ONE MELLON BANK CENTER PITTSBURGH PA 15258 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Scivillo, Joanne E 772 One Mellon Center Pittsburgh, PA 15258-0001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEISER, JOSEPH P 4826 ONE MELLON BANK CENTER PITTSBURGH PA 15258-0001 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4826 One Mellon Center Pittsburgh, PA 15258-0001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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: Joanne E. Scivillo 1/12/01 412-234-1334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)



805/00
Doc # 536184

Finance Department

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:

APU Chimney Lakes, Inc.

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

Very truly yours,

Michelle M. Malone

Michelle M. Malone

Enclosure(s)

cc: Joanne E. Sciallo

Tax Group

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

A Mellon Financial ResourceSM