

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2008 8:00 am
Secretary of State

01-18-2008 90007 023 ***163.75

40006004



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3061810

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VON DREELE, WAYNE
411 CENTRAL PARK DRIVE
SANFORD, FL 32771

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WOLF, WILLIAM J
STREET ADDRESS	202 PARK WEST DRIVE
CITY-ST-ZIP	PITTSBURGH, PA 15275
TITLE	DVPS
NAME	WOLF, RONALD W
STREET ADDRESS	202 PARK WEST DRIVE
CITY-ST-ZIP	PITTSBURGH, PA 15275
TITLE	P
NAME	NORRIS, RICHARD A
STREET ADDRESS	851 TRAFALGAR COURT-SUITE 320 WEST
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	X SVP
NAME	MENKER, DAVID R
STREET ADDRESS	851 TRAFALGAR COURT-SUITE 320 WEST
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	SVP
NAME	GILLIAM, DONALD A
STREET ADDRESS	851 TRAFALGAR COURT
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 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

Richard A. Norris 1/15/08 407-667-0999

Date

Daytime Phone #