

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V28112

1. Corporation Name

ISLEWORTH PROPERTIES, INC.

Principal Place of Business

Mailing Address

4850 MELLON BANK CENTER
PITTSBURGH, PA 15258-0001

APPROVED
AND
FILED

95 MAY -1 PM 5:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200001521472
-06/23/95--01011--019
***200.00 ***200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4-13-92

3a. Date of Last Report

3/30/95 94

4. FEI Number

25-1684525

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 One Mellon Bank Center

Suite, Apt. #, etc

22 Suite, Apt. #, etc

27 City & State

23 Pittsburgh, PA

28 Zip

24 15258-

29 Country

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Corporation Service Company
1201 Hays St.
Tallahassee, FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when resubmitting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE 401P
NAME HOLL, RICHARD L.
STREET ADDRESS 4850 ONE MELLON BANK CENTER
CITY - ST - ZIP PITTSBURGH, PA 15258-0001

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE ASST. SEC.
NAME WISE, CAROL L.
STREET ADDRESS One Mellon Bank Center
CITY - ST - ZIP PITTSBURGH, PA 15258-0001

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE CONTROLLER
NAME S. Lynn Taylor
STREET ADDRESS 2905 One Mellon Bank Center
CITY - ST - ZIP PA, PA 15258-0001

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME White man, Barbara J.
STREET ADDRESS 1820 One Mellon Bank Center
CITY - ST - ZIP Pittsburgh, PA 15258-0001

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME Laxinger, Mark P.
STREET ADDRESS 772 One Mellon Bank Center
CITY - ST - ZIP Pittsburgh, PA 15258-0001

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARK P. LAXINGER

MARK P. LAXINGER ASSISTANT TREASURER

896/21