

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State
 01-29-2001 90170 003 ***150.00

DOCUMENT # V31897

1. Entity Name
APD CROSSINGS, INC.

Principal Place of Business

**ONE MELLON BANK CENTER, ROOM 772
 PITTSBURGH PA 15258-0000**

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 **25-1707152**

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

**CORPORATION SERVICE COMPANY
 1201 HAYS ST.
 TALLAHASSEE FL 32301**

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 CTR PITTSBURGH PA 15258-0001	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PARNELL, VICKI K 5325 ONW MELLON BANK CTR PITTSBURGH PA 15258-0001	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POPKO, KENNETH H 1535 ONE MELLON BANK CTR PITTSBURGH PA 15258-0001	<input checked="" type="checkbox"/> Delete
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	AT SCIULLO, JOANNE E 772 ONE MELLON BANK CENTER 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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1535 One Mellon Center	
T Albert D. Larimer 4502 One Mellon Center	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
V Don A. Langford 1525 One Mellon Center	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4826 One Mellon Center	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
772 One Mellon Center	<input checked="" 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 Sciullo*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/01 412-234-1334
 Date Daytime Phone #

CR2E034 (10/00)



805098
Doc # S36162

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:

APD Crossings, 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. Sciullo

Tax Group

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

A Mellon Financial ResourceSM