

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90136 005 ***150.00

DOCUMENT # P31655

1. Entity Name
OPCO, INC.

Principal Place of Business

Mailing Address

500 ARCH ST.
 WILLIAMSON PA 17705
 US

500 ARCH ST.
 WILLIAMSON PA 17705
 US

00040796



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

c/o Tax dept
 Suite, Apt. #, etc.
500 Arch St

c/o Tax dept
 Suite, Apt. #, etc.
500 Arch St

City & State
Williamsport PA

City & State
Williamsport, PA

4. FEI Number **23-2621202**

Applied For
 Not Applicable

Zip *17705* Country *USA*

Zip *17705* Country *USA*

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PTD						
	LARGEN, JOSEPH D.	500 ARCH ST.	WILLIAMSPORT PA				
	CFOS						
	UZUPIS, STEVEN	500 ARCH ST	WILLIAMSON PA		CFOS		
	CD						
	BRODY, ARTHUR	990 HIGHLAND DR	SOLANA BEACH CA		UZUPIS, STEVEN	500 ARCH ST	WILLIAMSPORT PA 17705

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

Steven Uzupis,
CFo/Sec

4-17-01

Date

570-326-2461

Daytime Phone #

CR2E034 (10/00)