**FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00**

**PROFIT CORPORATION ANNUAL REPORT 1999**

**FLORIDA DEPARTMENT OF STATE**

**Katherine Harris**
Secretary of State

**DIVISION OF CORPORATIONS**

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**DOCUMENT # 843583**

1. **Corporation Name**
   - CARRIER CORPORATION

2. **Principal Place of Business**
   - 6304 CARRI ER PKWY.
   - P.O. BOX 4908
   - SYRACUSE NY 13221

3. **Mailing Address**
   - 6304 CARRI ER PKWY.
   - P.O. BOX 4908
   - SYRACUSE NY 13221

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**DATE OF INCORPORATION**

**06/27/1979**

**FILED**
Mar 02, 1999 8:00 am

Secretary of State

03-02-1999 90020 040 ***150 00

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**3. Date Incorporated or Qualified**

**06/27/1979**

**4. FEI Number**

**06-0991716**

**5. Certificate of Status Desired**

**Applied For**

**Not Applicable**

**$8.75 Additional Fee Required**

**6. Election Campaign Financing**

**$5.00 May Be Added to Fees**

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**8. This corporation owes the current year Intangible Property Tax.**

**Yes**

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**9. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM**

1200 S. PINE ISLAND ROAD

PLANTATION FL 33324

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**10. Name and Address of New Registered Agent**

**Assistant Secretary**

Joseph M. Savage

7885 East Ridge Pointe Drive

Fayetteville, N.Y. 13066

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**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**

Robert N. Hill

Assistant Secretary

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**12. OFFICERS AND DIRECTORS**

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY, ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>T</td>
<td>AS</td>
<td>REESE, FRANCES K.</td>
<td>BALDWINSVILLE, NY</td>
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<tr>
<td>T</td>
<td>P</td>
<td>LORD, JOHN</td>
<td>FARMINGTON, CT</td>
</tr>
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<td>T</td>
<td>VPOC</td>
<td>GALL, ROBERT E</td>
<td>SOUTHCOTTING, CT</td>
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<td>T</td>
<td>T</td>
<td>GROFF, MICHAEL R.</td>
<td>MYSTIC, CT</td>
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<td>T</td>
<td>VPCF</td>
<td>MINNICH, GEORGE E.</td>
<td>AVON, CT</td>
</tr>
<tr>
<td>T</td>
<td>AS</td>
<td>HILL, ROBERT N</td>
<td>LIVERPOOL, NY</td>
</tr>
</tbody>
</table>

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**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<table>
<thead>
<tr>
<th>TITLE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY, ZIP</th>
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<tbody>
<tr>
<td>11. TITLE</td>
<td>1. NAME</td>
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<td>1. CITY, ZIP</td>
</tr>
<tr>
<td>12. TITLE</td>
<td>2. NAME</td>
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<td>2. CITY, ZIP</td>
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<tr>
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<td>3. NAME</td>
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<td>3. CITY, ZIP</td>
</tr>
<tr>
<td>14. TITLE</td>
<td>4. NAME</td>
<td>4. STREET ADDRESS</td>
<td>4. CITY, ZIP</td>
</tr>
</tbody>
</table>

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**14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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, with all other like empowered.**

**SIGNATURE:**

Robert N. Hill

Assistant Secretary

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**Daytime Phone:**

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**CR200034 (1/98)**