

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F29733

(5)

1. Corporation Name
CABLE SENTRY CORPORATION

Principal Place of Business
P.O. BOX 472
5 WEST THIRD STREET
COUDERSPORT PA 16915

Mailing Address
P.O. BOX 472
5 WEST THIRD STREET
COUDERSPORT PA 16915

FILED
Sep 17 1997 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/29/1981

3a. Date of Last Report
11/01/1996

4. FEI Number

59-2114470

Applied For

Not Applicable

6. 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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2500 N TAMiami TRAIL

Suite, Apt. #, etc.

22 # 221

City & State

23 NAPLES FL

Zip

24 34103

Country

25 USA

2a. Mailing Address

26 2500 N TAMiami TRAIL

Suite, Apt. #, etc.

27 # 221

City & State

28 NAPLES FL

Zip

29 34103

Country

30 USA

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME RIGAS, JOHN J
STREET ADDRESS 5 WEST THIRD STREET
CITY-ST-ZIP COUDERSPORT PA 16915

TITLE VD ☐ DELETE

NAME RIGAS, MICHAEL J
STREET ADDRESS 5 WEST THIRD STREET
CITY-ST-ZIP COUDERSPORT PA 16915

TITLE VTD ☐ DELETE

NAME RIGAS, TIMOTHY J
STREET ADDRESS 5 WEST THIRD STREET
CITY-ST-ZIP COUDERSPORT PA 16915

TITLE VD ☐ DELETE

NAME RIGAS, JAMES P
STREET ADDRESS 5 WEST THIRD STREET
CITY-ST-ZIP COUDERSPORT PA 16915

TITLE DVS ☐ DELETE

NAME MILLIARD, DANIEL R
STREET ADDRESS 5 WEST THIRD STREET
CITY-ST-ZIP COUDERSPORT PA 16915

TITLE VAS ☐ DELETE

NAME FISHER, RANDALL D
STREET ADDRESS 5 WEST THIRD STREET
CITY-ST-ZIP COUDERSPORT PA 16915

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

James P. Rigas J.P.R.

CR2E034 (4/97)