

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

APPROVED AND FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norman
Secretary of State
Tallahassee, Florida 32304-0001

DOCUMENT # **F93000001892 (9)**
E. Corporation Name
OGDEN RANGE SERVICES, INC.

(DO NOT WRITE IN THIS SPACE)

Principal Place of Business: **TWO PENNSYLVANIA PLAZA NEW YORK NY 10121**
Mailing Address: **2 PENNSYLVANIA PLAZA 26TH FLOOR NEW YORK NY 10121**

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|---|--|
| 3. Date of Last Report 04/20/1993 | 3a. Date of Last Report 05/01/1994 |
| 4. FEI Number 13-3712961 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under S. 199(1)(2) Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| | |
|--|---|
| 2. Principal Place of Business 21. State: NY | 2a. Mailing Address 26. State: NY |
| 22. City & State: NY | 27. City & State: NY |
| 28. City & State: NY | 29. City & State: NY |
| 30. City & State: NY | 31. City & State: NY |

9. Name and Address of Current Registered Agent
**THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
SUITE 105
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 607.01, 607.02, and 607.03, 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 their corporate's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of a registered agent in Florida Statutes.

SIGNATURE: _____ DATE: _____

| 12. OFFICERS AND DIRECTORS | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
|---|---|
| TITLE: CP NAME: ABLON, R R STREET ADDRESS: TWO PENNSYLVANIA PLAZA NEW YORK NY 10121 CITY: VCVP NAME: CARAS, C G STREET ADDRESS: TWO PENNSYLVANIA PLAZA NEW YORK NY 10121 TITLE: DVS NAME: ALLEN, PETER STREET ADDRESS: TWO PENNSYLVANIA PLAZA NEW YORK NY 10121 TITLE: DVT NAME: DIGIA, ROBERT STREET ADDRESS: TWO PENNSYLVANIA PLAZA NEW YORK NY 10121 TITLE: VAS NAME: EFFINGER, J L STREET ADDRESS: TWO PENNSYLVANIA PLAZA NEW YORK NY 10121 TITLE: V NAME: GREEN, EDWARD STREET ADDRESS: 2200 WILSON BOULEVARD, SUITE 600 ARLINGTON VA 22201 | <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I hereby certify that the information supplied with this filing voluntarily represents true and correct facts for the corporation. I am familiar with the provisions of Sections 607.01, 607.02, and 607.03, Florida Statutes, and I hereby certify that the above information is true and correct to the best of my knowledge and belief, separately and jointly, and that my signature shall have the same legal effect and consequences as if it were a signature of the corporation. If the corporation or the registered agent fails to comply with the requirements of this chapter of the Florida Statutes, and that my name appears on the report or filing, I shall be held liable therefor.

SIGNATURE: *J. L. Effinger* J.L. Effinger Asst. Secty. 4/27/95 212-868-6143
SIGNATURE AND SEAL OF APPOINTED CLERK OF BOARD OF OFFICERS OR DIRECTORS