SECOND NOTICE: CARPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER MOUNT DUE ON OR BESOLVED TO SEE THE SEPTEMBER AMOUNT DUE FILED Secretary of State 1997 DIVISION OF CORPORATIONS 97 AUG -4 AM 9: 45 DOCUMENT # F9500003618 (4) SECKLITAK I GE STATE TALLAHASSEE, FLORIDA THE AYCO CHARITABLE FOUNDATION CORPORATION Principal Place of Business Mailing Address 1 WALL ST 1 WALL ST ALBANY NY 12205 ALBANY NY 12205 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 07/27/1995 08/07/1996 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 14-1782466 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 26 Zip Country Country 8. This corporation owes or has paid the current year Intangible Zip Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 105 83 TALLAHASSEE FL 32301 84 Zip Code City 85 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: Registored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 Change Addition DELETE 1.1 TITLE TITLE SARNI, VINCENT NAME 1.2 NAME 1 PPG PL 1.3 STREET ADDRESS STREET ADDRESS PITTSBURGH PA 15272 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE O'NEILL. PAUL 2.2 NAME NAME 425 6TH AVE, ALCOA BLDG STREET ADDRESS 2.3 STREET ADDRESS PITTSBURGH PA 15219 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change \_\_\_ Addition DELETE TITLE 3.1 TITLE HAMERLING, BARRY NAME 3.2 NAME 12 CATHEDRAL CT STREET ADDRESS **33 STREET ADDRESS CLIFTON PARK NY 12065** CITY-ST-ZIP 34. CITY-ST-ZIP ☐ Change \_\_\_ Addition DELETE 4.1 TITLE TITLE MARTIN. PETER R 4. 2 NAME NAME 28 WEXFORD RD 4.3 STREET ADDRESS STREET ADDRESS **DELMAR NY 12054** 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE TITLE COLLINS, JOHN J III 5.2 NAME NAME 29 SCHUYLER HILLS RD 5.3 STREET ADDRESS STREET ADDRESS **LONDONVILLE NY 12211** 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE WYNGOWSKI, LARRY NAME 6.2 NAME 20 DALLEYWOOD DR STREET ADDRESS 6.3 STREET ADDRESS **GLENVILLE NY 12302** CITY-ST-ZIP 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 outh; 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.

nlasion