FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **820890** **(2)**

1. Corporation Name
SPORTSERVICE CORPORATION

Principal Place of Business	Mailing Address
438 MAIN STREET BUFFALO NEW YORK 14202	438 MAIN STREET BUFFALO NEW YORK 14202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/13/1967**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: **16-0848422** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. The corporation has liability for intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 _____ DATE
(signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	11 TITLE	D	☐ Change ☒ Addition
NAME	TRYBUS, JANICE R.	12 NAME	RAHUBA, JESSICA	
STREET ADDRESS	438 MAIN STREET	13 STREET ADDRESS	438 MAIN STREET	
CITY ST ZIP	BUFFALO NY	14 CITY ST ZIP	BUFFALO NY	
TITLE	VT	21 TITLE	VT	☒ Change ☐ Addition
NAME	RAHUBA, JESSICA N.	22 NAME	SMITH, GORDON C.	
STREET ADDRESS	438 MAIN STREET	23 STREET ADDRESS	438 MAIN STREET	
CITY ST ZIP	BUFFALO NY	24 CITY ST ZIP	BUFFALO NY	
TITLE	D	31 TITLE	V	☐ Change ☒ Addition
NAME	KELLER, BRYAN J.	32 NAME	HERTENSTEIN, JACK	
STREET ADDRESS	438 MAIN STREET	33 STREET ADDRESS	438 MAIN STREET	
CITY ST ZIP	BUFFALO NY	34 CITY ST ZIP	BUFFALO NY	
TITLE	D	41 TITLE	D DELETE	☒ Change ☐ Addition
NAME	SZEFEL, DENNIS L.	42 NAME	SZEFEL, DENNIS L	
STREET ADDRESS	438 MAIN STREET	43 STREET ADDRESS	438 MAIN STREET	
CITY ST ZIP	BUFFALO NY	44 CITY ST ZIP	BUFFALO NY	
TITLE	V	51 TITLE	ASST S	☐ Change ☒ Addition
NAME	DANIELS, NORMAN J.	52 NAME	CHAMBERS, DAVID J.G.	
STREET ADDRESS	438 MAIN STREET	53 STREET ADDRESS	438 MAIN STREET	
CITY ST ZIP	BUFFALO NY	54 CITY ST ZIP	BUFFALO NY	
TITLE	PD	61 TITLE	V	☒ Change ☐ Addition
NAME	THOMPSON, MICHAEL F	62 NAME	DANIELS, NORMAN W.	
STREET ADDRESS	438 MAIN STREET	63 STREET ADDRESS	438 MAIN STREET	
CITY ST ZIP	BUFFALO NY	64 CITY ST ZIP	BUFFALO NY	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 the 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: _____ JANICE R. TRYBUS 4/27/95 (716) 858-5000
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Title Daytime Phone #
Secy.

0001877 CP