

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.)

FILED
Jul 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
		DOCUMENT # 846370 (5) 1. Corporation Name KAMTECH, INC.



Principal Place of Business 11 PEARL STREET GLENS FALLS NY 12801	Mailing Address 11 PEARL STREET GLENS FALLS NY 12801
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/27/1980		3a. Date of Last Report 02/22/1996	
21		26		4. FEI Number 14-1617596		Applied For Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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			

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 signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STINE, RICHARD A	1.2 NAME		
STREET ADDRESS	1152 CORONATION DRIVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	DUNWOODY GA 30338	1.4 CITY-ST-ZIP		
TITLE	AS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WEATHERSBY, ROY J	2.2 NAME		
STREET ADDRESS	510 VALLEY ROAD	2.3 STREET ADDRESS	Please See Attached	
CITY-ST-ZIP	ATLANTA GA 30305	2.4 CITY-ST-ZIP		
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLY, MORGAN F.	3.2 NAME		
STREET ADDRESS	19 HONEY HOLLOW ROAD	3.3 STREET ADDRESS		
CITY-ST-ZIP	QUEENSBURY NY 12804	3.4 CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JENKIN, THOMAS E	4.2 NAME		
STREET ADDRESS	49 HELEN DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	GLENS FALLS NY 12801	4.4 CITY-ST-ZIP		
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NEAPOLE, ROBERT C	5.2 NAME		
STREET ADDRESS	7880 FAWNDALE WAY	5.3 STREET ADDRESS		
CITY-ST-ZIP	DUNWOODY GA 30350	5.4 CITY-ST-ZIP		
TITLE	VP <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DANIEL, JERRY W	6.2 NAME		
STREET ADDRESS	1 OAK VIEW DRIVE	6.3 STREET ADDRESS		
CITY-ST-ZIP	FORT EDWARD NY 12828	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: *[Handwritten Signature]* 7/22/97 518-798-6401

CR2E034 (4/97)



Officers

President

Robert C. Neapole
7880 Fawndale Way
Dunwoody, GA 30350

Vice President

Jerry W. Daniel
4965 Oakmont Bend Drive
Alpharetta, GA 30201

Vice President

Dick A. Stine
1152 Coronation Drive
Dunwoody, GA 30338

Vice President

Robert W. Roy
18 Dorlan Drive
Queensbury, NY 12804

Vice President

James M. Whitney
7 Windy Hill Road
Glens Falls, NY 12801

Vice President/Treasurer

Christopher R. Keays
2 Alice Street
Hudson Falls, NY 12839

Secretary

Morgan F. Kelly
19 Honey Hollow Road
Queensbury, NY 12804

Assistant Secretary

David T. Pluta
47 Revere Road
Queensbury, NY 12804

Board of Directors

Thomas E. Jenkin
49 Helen Drive
Glens Falls, NY 12801

J. Roy Weathersby
510 Valley Road
Atlanta, GA 30305

Robert C. Neapole
7880 Fawndale Way
Dunwoody, GA 30350

Victor L. Bilodeau
16 Cobblestone Drive
Queensbury, NY 12804

Olavi A. Tervo
3474 Princeton Corners Drive
Marietta, GA 30062