2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE STIME COMPONENT PA 16915 Delete	1. Entity Nan	MENT # F9300 OLDINGS, INC.	0000719					2002 8:0 1ry of St 90015 034 ***15	ate	
Sulfe, Apt. #, etc. Sulfe, Apt. #, etc. DO NOT WRITE IN THIS SPACE	1 NORTH MA	AIN	1 NORTH MAIN COUDERSPORT PA 16915							
City & State City & State City & State City & State Country Country So C	2. Principal F	Place of Business	3. Mailing Address							
Second S	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
S. Country S.	City & Stat	te	City & State			4.	05.4705040			
S. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FI. 32301 City FL Zip Code City FL Zip Co	Zip	Country	Zip Country			5.	5. Certificate of Status Desired \$8.75 Additional			
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City		6. Name and Address of Current	l Registered Agent	1		7. 1	Name and Address of New Re			
TALLAHASSEE FL 32301 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or prince name of registered agent and tile if applicable. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (NOTE Registered agent, or both, in the State of Florida. (State Additional Planta Florida) (State Additional Planta Florida) (State Additional Planta Florida) (Change Additional Planta Florida) (Chang	1201 HAYS STREET									
SIGNATURE Streamer, typed or printed name of registered apert and the if applicable. IROTE Registered Agent algorithm required where relinations) DATE					City	City FL Zip Code				
PD RIGAS, JOHN J MAN AT WATER ST COUDERSPORT PA 16915 TITLE NAME NAME TITLE NAME NAME TITLE NAME NAM	Tax filing (See crite	requirement and elects to do so. ria on back)	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta			50.00 of State	Trust Fund Contribution. Added to Fees			
NAME STREET ADDRESS CITY-ST-ZIP NORTH Main Street Change Additional Street Chan	TITLE NAME STREET ADDRESS	PD RIGAS, JOHN J MAIN AT WATER ST		TITLE NAME STREE	T ADDRESS	1 North			RS IN 11	
RIGAS, JAMES P MAIN AT WATER ST COUDERSPORT PA 16915 ITHE VAME STREET ADDRESS CITY-ST-ZIP VTD RIGAS, TIMOTHY P MAIN AT WATER ST COUDERSPORT PA 16915 ITHE VAME STREET ADDRESS CITY-ST-ZIP VPAS FISHER, RANDALL D MAIN AT WATER ST COUDERSPORT PA 16915 ITHE VAME STREET ADDRESS CITY-ST-ZIP VPAS FISHER, RANDALL D MAIN AT WATER ST COUDERSPORT PA 16915 ITHE VAME STREET ADDRESS CITY-ST-ZIP VPAS FISHER, RANDALL D MAIN AT WATER ST COUDERSPORT PA 16915 ITHE VAME STREET ADDRESS CITY-ST-ZIP Delete ITHLE VAME STREET ADDRESS CITY-ST-ZIP COUDERSPORT PA 16915 ITHLE VAME STREET ADDRESS CITY-ST-ZIP COUDERSPORT PA 16915 CITY-ST-ZIP COUDERSPORT PA 16915 CHANGE Addition Change Change Addition Change Cha	NAME STREET ADDRESS	RIGAS, MICHAEL J MAIN AT WATER ST	☐ Delete	NAME STREE	T ADDRESS	Rigas, 1 North	Main Street	⊠ Change	☐ Addition	
RIGAS, TIMOTHY P MAIN AT WATER ST COTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP VPAS FISHER, RANDALL D MAIN AT WATER ST COUDERSPORT PA 16915 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM	NAME Street address	RIGAS, JAMES P MAIN AT WATER ST	☐ Delete	NAME STREE	T ADDRESS	1 North	Main Street	⊠ Change	☐ Addition	
FISHER, RANDALL D MAIN AT WATER ST COUDERSPORT PA 16915 Delete ITILE NAME NAME NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAME	NAME STREET ADDRESS	RIGAS, TIMOTHY P MAIN AT WATER ST	☐ Delete	NAME STREE	T ADDRESS	1 North	Main Street	🔼 Change	☐ Addition	
IAME NAME	NAME STREET ADDRESS	Fisher, randall d Main at water st	☐ Delete	NAME STREE		1 North	Main Street	🔀 Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME STREET ADDRESS		☐ Delete	NAME STREET				☐ Change	☐ Addition	

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Randall D. Fisher

1/25/02

(814) 274-9830

Daytime Phone #

CR2E034 (9/