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 APR 27 AM 8:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000001517 (2)

1. Corporation Name
KODAK IMAGING SERVICES, INC.

Principal Place of Business	Mailing Address
343 STATE STREET ROCHESTER NY 14650	343 STATE STREET ROCHESTER NY 14650

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/26/1993
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 16-1276049	☐ Applied For ☐ Not Applicable
21	26		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24: 14650-0904 / Country 25	Zip 29: 14650-0904 / Country 30	8. *This 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
C T CORPORATION SYSTEM 1200 SOUTH 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	P/D	☒ Change ☐ Addition
NAME	MONROE, GARY L	12 NAME	MONROE, GARY L.	
STREET ADDRESS	4 RANDOM KNOLLS DRIVE	13 STREET ADDRESS	343 STATE STREET	
CITY-ST-ZIP	PENFIELD NY 14526	14 CITY-ST-ZIP	ROCHESTER, NY 14650-0904	
TITLE	V	21 TITLE	V	☒ Change ☐ Addition
NAME	LOUGHMAN, STEPHEN	22 NAME	LOUGHMAN, STEPHEN	
STREET ADDRESS	55 MCCOORD WOODS DRIVE	23 STREET ADDRESS	343 STATE STREET	
CITY-ST-ZIP	FAIRPORT NY 14450	24 CITY-ST-ZIP	ROCHESTER, NY 14650-0904	
TITLE	S	31 TITLE	S	☒ Change ☐ Addition
NAME	HAAG, JOYCE P	32 NAME	HAAG, JOYCE P.	
STREET ADDRESS	137 TENNYSON WAY	33 STREET ADDRESS	343 STATE STREET	
CITY-ST-ZIP	PITTSFORD NY 14534	34 CITY-ST-ZIP	ROCHESTER, NY 14650-0904	
TITLE	T	41 TITLE	T/D	☒ Change ☐ Addition
NAME	WEINMANN, JOHN	42 NAME	LEFKO, ALAN J.	
STREET ADDRESS	126 ELMERSTON ROAD	43 STREET ADDRESS	343 STATE STREET	
CITY-ST-ZIP	ROCHESTER NY 14620	44 CITY-ST-ZIP	ROCHESTER, NY 14650-0904	
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	RIGHTMYER, ELLEN	52 NAME	BOURNS, RICHARD T.	
STREET ADDRESS	1208 MAYFLOWER AVENUE, #B	53 STREET ADDRESS	343 STATE STREET	
CITY-ST-ZIP	MONROVIA CA 92016	54 CITY-ST-ZIP	ROCHESTER, NY 14650-0904	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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 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: [signature] Joyce P. Haag 4/21/95 (716) 724-2595
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — (Optional) Phone #

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KODAK IMAGING SERVICES, INC.

SCHEDULE OF OFFICERS

JANUARY 1, 1995

NAME	TITLE	ADDRESS
Monroe, Gary L.	President	343 State Street Rochester, NY 14650
Baker, Randy L.	Vice President	343 State Street Rochester, NY 14650
Jabionski, Brian E.	Vice President	343 State Street Rochester, NY 14650
Loughman, Stephen	Vice President	343 State Street Rochester, NY 14650
Norman, John F.	Vice President	343 State Street Rochester, NY 14650
St. George, Phillip R.	Vice President	343 State Street Rochester, NY 14650
Parker, Paul A.	Secretary	343 State Street Rochester, NY 14650
Lefko, Alan J.	Treasurer/ Controller	343 State Street Rochester, NY 14650
Haag, Joyce P.	Assistant Secretary	343 State Street Rochester, NY 14650
Schmiedel, Cary G.	Assistant Treasurer	343 State Street Rochester, NY 14650

Note: Term Expires - Second Tuesday in June

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KODAK IMAGING SERVICES, INC.

SCHEDULE OF DIRECTORS

JANUARY 1, 1995

NAME	ADDRESS
Bourns, Richard T.	343 State Street Rochester, NY 14650
Ghadar, Fariborz	Washington, DC
Gotcsik, George H.	343 State Street Rochester, NY 14650
Lefko, Alan J	343 State Street Rochester, NY 14650
Monroe, Gary L.	343 State Street Rochester, NY 14650

Note: Term Expires - Second Tuesday in June