

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**Jan 23 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 # F94000001605 (4)**

1. Corporation Name  
**ORLANDO-KISCO CORPORATION**



Principal Place of Business      Mailing Address  
**C/O WALTER W. FARLEY  
111 RADIO CIRCLE  
MOUNT KISCO NY 10549**      **C/O WALTER W. FARLEY  
111 RADIO CIRCLE  
MOUNT KISCO NY 10549-2809**

3. Date Incorporated or Qualified      3a. Date of Last Report  
**03/29/1994**      **03/20/1996**

2. Principal Place of Business      2a. Mailing Address      4. FEI Number      Applied For  
**21**      **26**      **13-3759818**      Not Applicable

Suite, Apt. #, etc.      Suite, Apt. #, etc.      5. Certificate of Status Desired            **\$8.75 Additional Fee Required**

City & State      City & State      6. Election Campaign Financing Trust Fund Contribution            **\$5.00 May Be Added to Fees**

Zip      Country      Zip      Country      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

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET, STE 105  
TALLAHASSEE FL 32301**

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

12. OFFICERS AND DIRECTORS      13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	<b>KOHLBERG, ANDREW S</b>	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>111 RADIO CIRCLE</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>MOUNT KISCO NY</b>	1.4 CITY - ST - ZIP	
V	<b>FARLEY, WALTER W</b>	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>111 RADIO CIRCLE</b>	2.1 TITLE	
CITY - ST - ZIP	<b>MOUNT KISCO NY</b>	2.2 NAME	
S	<b>CAPONE, EILEEN</b>	2.3 STREET ADDRESS	
STREET ADDRESS	<b>111 RADIO CIRCLE</b>	2.4 CITY - ST - ZIP	
CITY - ST - ZIP	<b>MOUNT KISCO NY</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	
<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		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 addition with an address.

SIGNATURE: *Eileen Capone*      1/10/97      914-242-2312

CR2E034 (9/96)