

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**DOCUMENT # F94000003381 (0)**

1. Corporation Name

**PRESS ASSOCIATION, INC.**



Principal Place of Business

**50 ROCKEFELLER PLAZA  
NEW YORK NY 10020**

Mailing Address

**DON F. BLAIR  
50 ROCKEFELLER PLAZA  
NEW YORK NY 10020**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

**REINDL, JAMES  
9100 NW 36TH ST., STE. 104  
MIAMI FL 33178**

3. Date Incorporated or Qualified

**06/27/1994**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**13-1182832**

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. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes  Yes  No

10. Name and Address of New Registered Agent

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

Signature typed or printed name of registered agent and fee applicant

Date of Signature (Agent signature expires 1 year from filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PCEO	BOCCARDI, LOUIS D	101 VANECK DR.	NEW ROCHELLE NY 10804	<input type="checkbox"/>
VS	DONNA, JAMES M	96 LAKESIDE DR.	KATONAH NY 10536	<input type="checkbox"/>
VCFO	O'BRIEN, PATRICK T	8 SORRELL HILL COURT	DIX HILLS NY 11746	<input type="checkbox"/>
V	WILLIAMS, JAMES R	1909 WOOD VALLEY ROAD	MCLEAN VA 22101	<input type="checkbox"/>
V	TEMPLE, WICK	10 BERKELEY ROAD	MILBURN NJ 07041	<input type="checkbox"/>
T	JENSSEN, PAUL H	23 SEARINGTOWN ROAD	SEARINGTOWN NY 11507	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

**SIGNATURE: X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**James M. Donna VP & Secretary**

**4/26/96**

Date

**212-621-1812**

Phone No.

CR2E034 (12/95)