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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400003851

SAPERSTON FINANCIAL INC.

Principal Place of Business Mailing Address

**FILED** May 16 1997 8:00am Secretary of State



237 MAIN ST. SUITE 1100 BUFFALO NY 14203		237 MAIN ST. Suite 1100 Buffalo ny 14203-27	02						
					<ol> <li>Date Incorporated or Qualified 07/22/1994</li> </ol>	3a. Date 05/0	of Last 1/1996		
,	lace of Business	2a. Mailing Address			4. FEI Number		Applied For		
21		26			16-1384003	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc	27		5. Certificate of Status Desired		Fee Required		
City & State		City & State	իարոր ՝		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29]	Country 30	/	8. This corporation has liability for intangible tax under s 199.032 Florida Statutes Yes X No				
99.10	9. Name and Address of Cur	rent Registered Agent		<del></del>	10. Name and Address of New Re	gistered A	gent		
	PRENTICE-HALL CORPORAT 1 HAYS ST.	IUN SYSTEM, INC.	YSTEM, INC. 81 Nam						
SU	TE 105				dress (P.O. Box Number is Not Acceptab	le)			
IAL	LAHASSEE FL 32301		63						
i			84	City		FL	85 Zq	p Code	
office or r	registered agent, or both, in the Standard miliar with, and accept the ob	ate of Florida. Such change wa ligations of, Section 607.0505,	as authorized b	vithe corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of c of the appoi	hanging nlment a	its registered is registered	
	Signature, lyped or printed name of registered	I DOUBLE TO THE PARTY OF THE PA		ent signature requ	ured whon rainstaling)	DAH			
12.	OFFICERS 7	AND DIRECTORS  DELETE	13. 1.1 HELE		ADDITIONS/CHANGES TO OFFIC		DIRECTO Change		
NAME	SAPERSTON, WILLARD B		1.2 NAME			L	Ghange	: La vogition	
STREET ADDRESS	237 MAIN ST. STE. 1100			I ADDRESS					
CITY-ST-ZIP	BUFFALO NY 14203		1.4 CiTY - 1						
TITLE	VP	DELETE	21 TITLE	21-14		·· [	Change	Addition	
NAME	SACKETT, JUSTUS RUSSEI	ΤJ	2.2 NAME			•			
STREET ADDRESS	237 MAIN ST. STE. 1100		2 3 STREE	ADDRESS					
CITY-ST-ZIP	BUFFALO NY		2 4 CITY-	S1-7IP					
TITLE		DELETE	3.1 111LE				Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	I ADDRESS					
CITY-ST-ZIP			3.4. CITY -	ST-7IP		·	_		
TITLE		☐ DELE1€	4.1 THILE				Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP	· .	T Britie	4.4 CITY-1	ST - ZIP			Observe		
IIILE NE NA	392	☐ DELETE	5.0 1016			L	_] Change	Addition	
NAME OXDEET ADDRESS			5.2 NAME						
STREET ADDRESS				ADDRESS					
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		verest	6.1 TiTLE			L	change	AUUIION	
NAME etreet andrees			6.2 NAME	I ADDUCC					
STREET ADDRESS	,			ADDRESS					
CITY-ST-ZIP			6.4 CITY - 1	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 logal 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