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Mar 06 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 # F95000000091 (7)

1. Corporation Name:  
BLI/ORE 2, INC.



Principal Place of Business  
% OFFICE OF THE GENERAL COUNSEL  
ONE MARINE MIDLAND CENTER, 27TH FLOOR  
BUFFALO NY 14203-2827

Mailing Address  
% OFFICE OF THE GENERAL COUNSEL  
ONE MARINE MIDLAND CENTER, 27TH FLOOR  
BUFFALO NY 14203-2842

3. Date Incorporated or Qualified  
01/06/1995

3a. Date of Last Report  
03/25/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number APPLIED FOR 16-1472372		Applied For Not Applicable	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		5. Certificate of Status Desired		8.75 Additional Fee Required	
22. City & State		27. City & State		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
23. Zip		28. Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	
24. Country		29. Country		30. Country			

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE FL 32301				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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D TOOHEY, PHILIP S	1.1 TITLE	
NAME	ONE MARINE MIDLAND CENTER	1.2 NAME	
STREET ADDRESS	BUFFALO NY 14203-2827	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	P KARLSSON, LEIF B	2.1 TITLE	
NAME	ONE MARINE MIDLAND CENTER	2.2 NAME	
STREET ADDRESS	BUFFALO NY 14203-2827	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V CONYBEARE, CAROLYN E	3.1 TITLE	ASSISTANT TREASURER
NAME	140 BROADWAY	3.2 NAME	RICHARD P. RICH
STREET ADDRESS	NEW YORK NY 10005	3.3 STREET ADDRESS	ONE MARINE MIDLAND CENTER
CITY-ST-ZIP		3.4 CITY-ST-ZIP	BUFFALO, NY 14203-2827
TITLE	V STRUBEL, JOSEPH	4.1 TITLE	
NAME	140 BROADWAY	4.2 NAME	
STREET ADDRESS	NEW YORK NY 10005	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	S TOOHEY, PHILIP S	5.1 TITLE	
NAME	ONE MARINE MIDLAND CENTER	5.2 NAME	
STREET ADDRESS	BUFFALO NY 14203	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	AS KUJAWA, HELEN	6.1 TITLE	
NAME	ONE MARINE MIDLAND CENTER	6.2 NAME	
STREET ADDRESS	BUFFALO NY 14203	6.3 STREET ADDRESS	
CITY-ST-ZIP		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 attachment with an address.

SIGNATURE: RICHARD P. RICH 2/11/97 716 841 2153

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (9/96)