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FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000004492 (3)

1. Corporation Name

CONESTOGA-ROVERS & ASSOCIATES, INC.



Principal Place of Business

2055 NIAGARA FALLS BLVD #3
NIAGARA FALLS NY 14304

Mailing Address

2055 NIAGARA FALLS BLVD #3
NIAGARA FALLS NY 14304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/15/1995

4. FEI Number
16-1229774

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP
NAME ROVERS, FRANK A
STREET ADDRESS 14 POST HORN PL
CITY-ST-ZIP WATERLOO, ONTARIO N2L 5E9

TITLE DV
NAME MONTEITH, BRUCE
STREET ADDRESS 231 OLD ABBEY RD
CITY-ST-ZIP WATERLOO, ONTARIO N2K 3A1

TITLE DV
NAME SHEPHERD, RICHARD
STREET ADDRESS 252 SHAGBARK CT
CITY-ST-ZIP WATERLOO, ONTARIO N2K 2Z7

TITLE DS
NAME KAY, JAMES K
STREET ADDRESS 10 JAMES CT
CITY-ST-ZIP HEIDELBERG, ONTARIO NOB 1Y0

TITLE DT
NAME HAYCOCK, DONALD H
STREET ADDRESS 3 GRAND RIVER DR
CITY-ST-ZIP WATERLOO, ONTARIO N2J 4G8

TITLE DV
NAME ROBERTS, EDWARD
STREET ADDRESS 367 FORESTLAWN RD
CITY-ST-ZIP WATERLOO, ONTARIO N2K 2J4

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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.

CP2E034 (10/97)