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May 05 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F95000005276 (9)

1. Corporation Name

BUSH SERVICE GROUP, INC.

Principal Place of Business

ONE MASON DRIVE  
P.O. BOX 460  
JAMESTOWN NY 14701

Mailing Address

ONE MASON DRIVE  
P.O. BOX 460  
JAMESTOWN NY 14701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERICAN INFORMATION SERVICES, INC.  
ONE SE 3RD AVENUE  
27TH FLOOR  
MIAMI FL 33131-1704

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
BUSH, PAUL  
ONE MASON DRIVE  
JAMESTOWN NY 14701

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
C P  
BUSH, PAUL  
ONE MASON DRIVE  
JAMESTOWN, NY 14701

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
AYRES, ROBERT  
ONE MASON DRIVE  
JAMESTOWN NY 14701

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
D. EXEC V  
AYRES, ROBERT  
ONE MASON DRIVE  
JAMESTOWN, NY 14701

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
BUSH, DOUG  
ONE MASON DRIVE  
JAMESTOWN NY 14701

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
MESSINGER, DAVID  
ONE MASON DRIVE  
JAMESTOWN NY 14701

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETED

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
S  
ARONSON, LOUIS  
ONE MASON DRIVE  
JAMESTOWN, NY 14701

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETED

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
T, Asst Secy  
FREDERICK, NEN  
ONE MASON DRIVE  
JAMESTOWN, NY 14701

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.

CR2E034 (10/97)