

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9700005209

2. Principal Place of Business

21

GFC COMMUNICATIONS N.Y., INC.

Principal Place of Business	Mailing Address
322 GREAT OAKS OFFICE PARK	322 GREAT OAKS OFFICE PARK

26

2a. Mailing Address

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90139 049 \*\*\*150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

Applied For

Not Applicable

10/06/1997 4. FEI Number

14-1668125

27   Cry & State   Criy &	Suite, Apt. :	t. #, etc. Suite, Apt. #, etc.						5. Certifcate of	Status Desired		\$6.73 F		
Trush Fund Contribution	22		27								Fee Ke	quirea	
Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip		— ·											
9. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  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 agent. I am familiar with, and accept the obligations of, Section 607,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE:  SIGNATUR		Country		<del></del>	Count	rv				rant year Int			
9. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 807,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 507,0505, Florida Statutes.  SIGNATURE.  SIGNATURE.  12. OFFICERS AND DIRECTORS 113. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 11. TITLE  12. OFFICERS AND DIRECTORS 11. TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY ST.2P  MONTANARO, DAVID M  15. Name  12. Name  15. Name  16. Name and Address of New Registered Agent  16. Name and Address of New Registered Agent  17. Name  18. City FL 85 Zip Code  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Name  10. Name  10. Name  12. Name  13. Name  13. Name  14. City FL 85 Zip Code  15. Name  16. Name and Address of New Registered Agent  16. Name and Address of New Registered Agent  17. Name  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. Name  10. Name  10. Name  10. Name  10. Name  11. Name  12. Name  12. Name  13. Name To Name  14. TITLE  14. CITY ST.2P  15. Name  14. CITY ST.2P  15. Name  15. Name  16. Name Addition  16. N	<b>一</b>	<u> </u>	<b>⊢</b> '	• —									
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FI, 32301-2525  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, and both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, and both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, and both, and accept the obligations of, Section 607,6505, Florida Statutes.  SIGNATURE SIG	24]				ر <u>ب</u>				<u> </u>	Registered			
CORPORATION SERVICE COMPANY 1201 HAY'S STREET TALLAHASSEE FL 32301-2525  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE.  Signature, Spot or provided runns of registered agent and the # signature.  Po Process AND DIRECTORS 1.2 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 1.1 TITLE  OFFICERS AND DIRECTORS 1.2 ANAME  12. NAME  MONTANARO, DAVID M  STREET ADDRESS  COTY-ST-ZP  MANLUS NY 13104  LORING-ST-ZP  DEWITT NY 13224  DELETE 1.1 TITLE  OV DELETE 2.1 TITLE  OV DELETE 3.1 TITLE  STREET ADDRESS  COTY-ST-ZP  DEWITT NY 13224  DELETE 3.1 TITLE  OV DELETE 3.1 TITLE  OV DELETE 3.1 TITLE  STREET ADDRESS  COTY-ST-ZP  DEWITT NY 13224  DELETE 3.1 TITLE  STREET ADDRESS  COTY-ST-ZP  DEWITT NY 12203  DELETE 5.1 TITLE  STREET ADDRESS  COTY-ST-ZP  DEWITT NY 12203  DELETE 5.1 TITLE  STREET ADDRESS  ST		9. Name and Address of Culterit	registered A	Actir	8	1 Name		TO: INGINE GITA					
1201 HAYS STREET TALLAHASSEE FL 32301-2525  82   Street Address (P.O. Box Number is Not Acceptable)  14. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorized by ehen opporation's board of directors. I thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, the opporation's board of directors. I thereby accept the appointment as registered agent, and the provisions of registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, and the provisions of registered agent, or both, in the State of Florida. Such change was authorized by ehen opporation's board of directors. I thereby accept the appointment as registered agent agents and the provisions of registered agent and the provisions of registered agent agents required when refunding)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. NAME  15. TITLE  16. TITLE  17. TITLE  18.	COR	PORATION SERVICE COMPANY			ľ	1	•						
TALLAHASSEE FL 32301-2525  ### City	1201 HAYS STREET					82 Street Address (P.O. Box Number is Not Acceptable)							
### City						<u> </u>							
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 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, 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 agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE:    12	IALL	ANAOSEE FE SZSUTZSZS			8	3							
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent accept the obligations of, Section 607.0505, Florids Statutes.  SIGNATURE:    12.					8	4 City			`		85 Zip (	Code	
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I fine each section agent. I am familiar with, and accept the obligations of, Section 807.0505, Florida Statutes.  SIGNATURE.  Signature, Typied or printed name or registered agent and tise it applicable.  (NOTE: Registered Agent signature required when retristative)  DATE  12. OFFICERS AND DIRECTORS IN 12  TITLE  CP DELETE 1.1TITLE  MONTANARO, DAVID M  STREET ADDRESS  CITY-ST-ZP  MANLIUS NY 13104  14 CITY-ST-ZP  DAST DELETE 2.1TITLE  DAST DELETE 2.1TITLE  CIFFORD, FRANCIS J  33 STREET ADDRESS  CITY-ST-ZP  DEWITT NY 13224  24 CITY-ST-ZP  DEWITT NY 13224  24 CIFFORD, FRANCIS J  33 STREET ADDRESS  CITY-ST-ZP  DONOYAN, TIMOTHY  STREET ADDRESS  CITY-ST-ZP  DONOYAN, TIMOTHY  322 GREAT OAKS OFFICE PARK  ALBANY NY 12203  ALGTY-ST-ZP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZP  DELETE  61 TITLE  SONOYAN, TIMOTHY  STREET ADDRESS  CITY-ST-ZP  TITLE  DONOYAN, TIMOTHY  STREET ADDRESS  STREET AD											.		
SIGNATURE Signature, Typad or printed rame of registered apent and itse if applicable. (NOTE Registered Agent signature required when reinstative)  12. OFFICERS AND DIRECTORS  TITLE CP	11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508	Florida Statutes	the abo	ve-name	d corpor	ation submits this	statement for the	purpose of	changing its	registered	
SIGNATURE	office or re	egistered agent, or both, in the State of	Florida, Such	change was auth	norized b	y the cor	poration	s poard of directo	лъ. г пегеру ассе	purine appoil	muent as re	Jisiereu Jisiereu	
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13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   N 12	SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable	. (NOTE: R	egistered Ag	jent signatur	w beniupen e	when reinstating)		DATE			
MONTANARO, DAVID M   12 NAME   12 NAME   13 STREET ADDRESS   13 STREET ADDRESS   13 STREET ADDRESS   14 CITY-ST-ZIP					13.			ADDITIONS/	CHANGES TO OF	FICERS AN	ID DIRECTO	RS IN 12	
NAME   MONTANARO, DAVID M   STREET ADDRESS   8204 DUVALL CIRCLE   13 STREET ADDRESS   14 CITY-ST-ZIP   MANLIUS NY 13104   14 CITY-ST-ZIP   Change   Addition   Addi		CP		DELETE	1.1 TITLE	:	T				☐ Change	Addition	
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indicated on this annual report or expression and an address, in the exemption states in Section 1.19.07(3)(f), Florida Statutes. In order certify that the information indicated on this annual report or expression and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the copporation or the receiver of 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, with all other like empowered.

**SIGNATURE** 

4/13/99

516-753-7326