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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

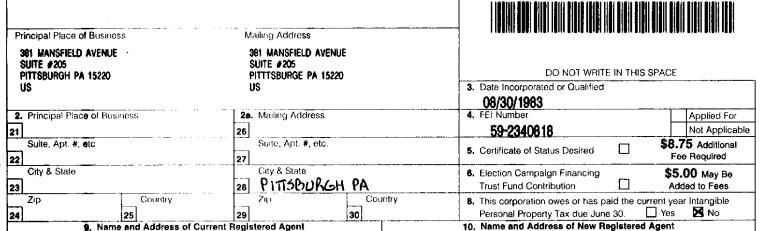
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G58491

GALWAY TECHNOLOGIES, INC.

(3)

## FILED May 21 1998 8:00am Secretary of State



9. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

81	Name		
82	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City	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 land accept the othgalions of, Section 607.0505, Florida Statutes.

agent. i a	m tamiliar with land accept the eargalions of, Section 607.0505, Flor	ida Statutes.			
SIGNATURE	Signature, typed or proded name of registered agent and the diapple after (NOTE	Registered Agent signature	required when rainstating)	DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C DELETE	1.1 TOLE		☐ Change	Addition
NAME	WRIGHT, THOMAS D	1.2 NAME			
STREET ADDRESS	<b>500 GREENTREE COMMONS, 381 MANSFIELD AVE.</b>	1.3 STREET ADDRESS			
CITY-ST-ZIP	PITTSBURGH PA 15220	1.4 CHY - ST - ZIP			
TITLE	DP DELETE	2.1 TOTLE		Change	Addition
NAME	RODDEY, JAMES C.	2.2 NAME			
STREET ADDRESS	<b>500 GREENTREE COMMONS, 381 MANSFIELD AVE.</b>	2.3 STREET ADORESS			
CITY-ST-ZIP	PITTSBURGH PA 15220	2. 4 CITY - ST - ZIP			
TITLE	DS DELETE	3.1 T(T) E		Change	Addition
NAME	TALARICO, RICHARD W	3.2 NAME			
STREET ADDRESS	500 GREENTREE COMMONS, 381 MANSFIELD AVE.	3.3 STREET ADDRESS			
CITY-ST-ZIP	PITTSBURGH PA 15220	3.4 CITY-ST-ZIP			
TITLE	V DELETE	4.1 TITLE		Change	Addition
NAME	HALLORAN, KEVIN C	4. 2 NAME			
STREET ADDRESS	381 MANSFIELD AVENUE, SUITE 205	4.3 STREET ADDRESS			
CITY-ST-ZIP	PITTTSBURGE PA	4.4 CITY - ST - ZIP	PITTSBURGH PA 15220		
TITLE	VT DELETE	5.1 TATLE		Change	Addition
NAME	MADDEN, JOHN S	5.2 NAME			
STREET ADDRESS	381 MANSFIELD AVENUE, SUITE 205	5 3 STREET ADDRESS			
CITY-ST-ZIP	PITTSBURGH PA	5.4 CITY - ST - ZIP	PITTSBURGH PA 15220		
TITLE	VAS DELETE	6 1 TITLE		☐ Change	Addition
NAME	ALBANESI, THOMAS S., JR.	6.2 NAME			
STREET ADDRESS	381 MANSFIELD AVENUE, SUITE 205	6.3 STREET ADDRESS			
CITY-ST-ZIP	PITTSBURGH PA	6.4 CITY - ST - ZIP			

14. Thereby 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 eath; 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 13 if manged, or on an attachment with an address.

an altachment with an address.

CR2E034 (10/97)