

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

FILED
Feb 04 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 # **K06726** (9)
1. Corporation Name
MERCOM OF FLORIDA, INC.



Principal Place of Business 105 CARNEGIE CENTER PRINCETON NJ 08540 US	Mailing Address 105 CARNEGIE CENTER PRINCETON NJ 08540 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 MAIN AT WATER STREET Suite, Apt. #, etc. 22 City & State 23 COUDERSPORT PA Zip 24 16915		2a. Mailing Address 26 MAIN AT WATER STREET Suite, Apt. #, etc. 27 City & State 28 COUDERSPORT PA Zip 29 16915		3. Date Incorporated or Qualified 12/09/1987	
4. FEI Number 31-1232693		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYS. INC. 82 Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 83 SUITE 105 84 City TALLAHASSEE 85 Zip Code FL 32301	
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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 *S. A. Gilbert* 1/14/98
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	D MCCOURT, DAVID C 105 CARNEGIE CENTER PRINCETON NJ <input checked="" type="checkbox"/> DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	PD RIGAS, JOHN MAIN AT WATER STREET COUDERSPORT PA 16915 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MAHONEY, MICHAEL J. 105 CARNEGIE CENTER PRINCETON NJ <input checked="" type="checkbox"/> DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	VD RIGAS, JAMES MAIN AT WATER STREET COUDERSPORT PA 16915 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SAILE, JAMES 105 CARNEGIE CENTER PRINCETON NJ <input checked="" type="checkbox"/> DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	VD RIGAS, MICHAEL J. MAIN AT WATER STREET COUDERSPORT PA 16915 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GODFREY, BRUCE 105 CARNEGIE CENTER PRINCETON NJ <input checked="" type="checkbox"/> DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	VSD MILLIARD, DANIEL R. MAIN AT WATER STREET COUDERSPORT PA 16915 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FILIPOWICZ, JOHN 105 CARNEGIE CENTER PRINCETON NJ <input checked="" type="checkbox"/> DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	VTD RIGAS, TIMOTHY J. MAIN AT WATER STREET COUDERSPORT PA 16915 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV OSTROSKI, RYMOND B 105 CARNEGIE CENTER PRINCETON NJ <input checked="" type="checkbox"/> DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	VAS FISHER, RANDALL D. MAIN AT WATER STREET COUDERSPORT PA 16915 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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.

SIGNATURE *R. D. Fisher* RANDALL D. FISHER 1/14/98 (814) 274-9830

CR2E034 (10/97)