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Apr 01 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L94093** (6)  
1. Corporation Name  
**DOWDY MINNESOTA 10, INC.**

Principal Place of Business  
**180 S. CLINTON AVENUE  
CORPORATE TAX, 4TH FLOOR  
ROCHESTER NY 14846**

Mailing Address  
**180 S. CLINTON AVENUE  
CORPORATE TAX, 4TH FLOOR  
ROCHESTER NY 14846-0001**



3. Date Incorporated or Qualified  
**08/17/1990**

3a. Date of Last Report  
**06/24/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>59-3029273</b>	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	13. See Attached ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>CEO CARR, JEREMIAH T 180 S. CLINTON AVENUE ROCHESTER NY 14846</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>PCOO <del>BAASE, JAMES E</del> 180 S. CLINTON AVENUE ROCHESTER NY 14846</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>P/coo Jefferson L. McGehee 180 S. Clinton Ave. Rochester, NY 14646</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>T ENIS, JOSEPH 180 S. CLINTON AVENUE ROCHESTER NY 14846</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>S <del>TRUBEK, JOSEPHINE S</del> 180 S. CLINTON AVENUE ROCHESTER NY 14846</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Trubek, Josephine S</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>AS LAVERDI, BARBARA J 180 S. CLINTON AVENUE ROCHESTER NY 14846</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>AT <del>LARKE, DEBORAH S</del> 30300 TELEGRAPH ROAD BINGHAM FARMS MI 48025-4510</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>AT Michael L. Evans 180 S. Clinton Ave. Rochester, NY 14646</b>

14. I do 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: Barbara J. Laverdi 3/18/97 (716) 777-8000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
0007187

Dowdy Minnesota 10, Inc.  
Document # L94093

**ADDITIONAL DIRECTORS AND OFFICERS**

Director  
Robert L. Barrett  
180 S. Clinton Ave.  
Rochester, NY 14646

Director  
Kevin J. Bennis  
180 S. Clinton Ave.  
Rochester, NY 14646

Director  
Ronald L. Bittner  
180 S. Clinton Ave.  
Rochester, NY 14646

Director  
James G. Dole  
180 S. Clinton Ave.  
Rochester, NY 14646

Director  
Louis L. Massaro  
180 S. Clinton Ave.  
Rochester, NY 14646

Vice President, General Manager  
Gerald B. Wilke  
180 S. Clinton Ave.  
Rochester, NY 14646

Chief Financial Officer  
Richard A. Smith  
180 S. Clinton Ave.  
Rochester, NY 14646