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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1998 8:00am

Secretary of State

410-992-6468

Daytme Phone # 0534844

- 1 100/1004 101 110) E410: 1214 1018: 014 #161 1016 0141 1100 0101 1101 1104

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

SIGNATURE:

P10895

(1)

THE SARATOGA EQUIPMENT CORPORATION

				{	B	
Principal Place of Business Mailing Address ** JOHN J. SZYMANSKI C/O JOHN J. SZYMANSKI						
THE ROUSE COMPANY BLDG. COLUMBIA MD 21044		THE ROUSE COMPANY BUILDING COLUMBIA MD 21044 US			DO NOT WRITE IN	THIS SPACE
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
		00			07/24/1986	
9 Principal P	lace of Rusiness	2a. Mailing Address			4. FEI Number	Applied For
2. Principal Place of Business		<u> </u>		52-0792585	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.			\$9.75 Audit	
		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		• Firsting Committee Firsting		
		⊢ı ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country Zip		Zip	Country		8. This corporation owes or has paid	
24.	├ ── ├ ── ├ ── ├ ──		30		Personal Property Tax due June 30	–
24.[g Name and Address of Current		30		10. Name and Address of New Regis	
·	···· ···	negratered regent	81	Name	10. Name and reaction of the reaction	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324						
			82	Street Address (P.O. Box Number is Not Acceptable)		
			83			
			03			
			84	City		85 Zip Code
						FL
11. Pursuant	to the provisions of Sections 607.0502	r and 607.1508, Florida Statute of Florida, Such change was a	es, the above athorized by	e-named corp the corpora	poration submits this statement for the purplings board of directors. Thereby accept to	pose of changing its registered he appointment as registered
agent. I a	m familiar with, and accept the obliga-	tions of, Section 607.0505, Flo	rida Statutes	i ino compora	tion's board of directors. I hereby accept t	opposition as regional
SIGNATURE						
Signature, typed or printed name of (eg stered agent and the if appel ab) (NOTE				int signature requi	- ou morremanny	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	P	☐ DELETE	1.1 TITLE			Change Addition
NAME	DEERING, ANTHONY		1 2 NAME			
STREET ADDRESS			1.3 STREET	ADDRESS		
CITY-ST-ZIP	COLUMBIA MD		1.4 CITY - S	T · ZIP		
TITLE	VP	☐ D€LETE	2.1 TITLE			Change Addition
NAME	BODEN, WILLIAMD.		2.2 NAME			
STREET ADDRESS	•		2.3 STREET	ADDRESS		
CITY-ST-ZIP	COLUMBIA MD		2 4 CITY-	ST - ZIP		
TITLE	VP	DELETE	3 1 TITLE			Change Addition
NAME	MCGREGOR, DOUGLAS A		3.2 NAME			
STREET ADDRESS	10275 LITTLE PATUXENT PK		3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4 CITY-	ST - ZIP		
TITLE	\$	DELETE	4 1 TITLE			Change Addition
NAME	ROTHSCHILD, BRUCE I.		4. 2 NAME			
STREET ADDRESS	10257 LITTLE PATUXENT PK.		4 3 STREET ADDRESS			
CFTY-ST-ZIP	COLUMBIA MD		4.4 CITY - S	it - ZIP		
TITLE	Vī	DELETE	5 1 TITLE			Change Addition
NAME	DONAHUE, JEFFREY H.		5.2 NAME			
STREET ADDRESS	AAATE LITTLE DATINGATE DA		5 3 STREET	ADDRESS		
CITY-ST-ZIP	COLUMBIA MD		5.4 CITY-S			
TITLE	V	DELETE	6 1 TITLE			Change Addition
NAME	SZYMANSKI, JOHN J.		6.2 NAME			· • —
STREET ADDRESS 10275 LITTLE PATUXENT PK		63 STREET	AUDBESS			
SINEEL MUUNESS	INFINITION INTOVERSITY		DOSINECT	NUUNEOO		

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 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 charteed, often an address

R PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN J. SZYMANSKI, VP