

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 21 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P19011** (6)
1. Corporation Name
CIS INVESTMENT CORPORATION

Principal Place of Business: **ONE CIS PARKWAY SYRACUSE NY 13221-4785**
Mailing Address: **ONE CIS PARKWAY SYRACUSE NY 13221-4785**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date of Incorporation or Creation	3a. Date of Last Report
21. One Northern Concourse		21. One Northern Concourse		04/26/1988	02/16/1994
22. Suite, Apt. #, etc. PO Box 4785		27. Suite, Apt. #, etc. PO Box 4785		4. FEI Number	Applied Fee
23. City & State Syracuse, NY		28. City & State Syracuse, NY		04-2964671	\$8.75 Additional Fee Required
24. Zip 13221	25. Country USA	29. Zip 13221	30. Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 193(3)? Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST SUITE 105 TALLAHASSEE FL 32301				B1	Name
				B2	Street Address (P.O. Box Number is Not Acceptable)
				B3	
				B4	City
				FL	B5 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: _____ (Signature typed or printed name of registered agent and date of signature)

12. OFFICERS AND DIRECTORS		13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	P/D
NAME	SEEKINGS, MICHAEL R	12. NAME	Richard B. Lasken
STREET ADDRESS	1 CIS PKWY.	13. STREET ADDRESS	One Northern Concourse
CITY-ST. ZIP	SYRACUSE NY	14. CITY-ST. ZIP	Syracuse, NY 13221-4785
TITLE	VS	2. TITLE	V/S/D
NAME	WIENEKE, DANIEL L	21. NAME	Daniel L. Wieneke
STREET ADDRESS	1 CIS PKWY.	22. STREET ADDRESS	One Northern Concourse
CITY-ST. ZIP	SYRACUSE NY	23. CITY-ST. ZIP	Syracuse, NY 13221-4785
TITLE	D	3. TITLE	T/D
NAME	SCIANDRA, PAUL M	32. NAME	Frank J. Corcoran
STREET ADDRESS	1 CIS PKWY.	33. STREET ADDRESS	One Northern Concourse
CITY-ST. ZIP	SYRACUSE NY	34. CITY-ST. ZIP	Syracuse, NY 13221-4785
TITLE		4. TITLE	
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-ST. ZIP		44. CITY-ST. ZIP	
TITLE		5. TITLE	
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-ST. ZIP		54. CITY-ST. ZIP	
TITLE		6. TITLE	
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-ST. ZIP		64. CITY-ST. ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(1)(b), Florida Statutes. I hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that the signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the recipient or transferee empowered to execute this report as required by Chapter 443, Florida Statutes, and that my name appears in Block 12 or Block 13, unchanged, on an attached addendum.

SIGNATURE: *Daniel L. Wieneke* Daniel L. Wieneke/ VP & Sec 3/8/95
 (315) 455-1900

3/23