FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 14 AM 8:26

DOCUMENT # P27237 (7)

1. Corporation Name
OSBORN SOUND & COMMUNICATIONS OF FLORIDA, INC.

Principal Place of Business	Mailing Address
405 LEXINGTON AVENUE, 54TH FLOOR NEW YORK NY 10174	405 LEXINGTON AVENUE, 54TH FLOOR NEW YORK NY 10174

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/11/1989
3a. Date of Last Report: 03/22/1994

2. Principal Place of Business (21): 130 Mason St
2a. Mailing Address (26): 130 Mason St.
Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):
City & State (23): Greenwich CT
City & State (28): Greenwich CT
Zip (24): 06830
Country (25):
Zip (29): 06830
Country (30):

4. FEI Number: 65-0158498 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 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: (Type or Print Name of Registered Agent and Title, if Applicable) (Both Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☒ Change ☐ Addition
NAME	OSBORN, FRANK D.	12 NAME		
STREET ADDRESS	405 LEXINGTON AVE, 54 FL	13 STREET ADDRESS	130 Mason Street	
CITY-ST-ZIP	NEW YORK NY	14 CITY-ST-ZIP	Greenwich CT	
TITLE	P	21 TITLE		☒ Change ☐ Addition
NAME	HILLEBRAND, CHARLES	22 NAME		
STREET ADDRESS	405 LEXINGTON AVE, 54 FL	23 STREET ADDRESS	130 Mason St	
CITY-ST-ZIP	NEW YORK NY	24 CITY-ST-ZIP	Greenwich CT	
TITLE	T	31 TITLE	T	☐ Change ☒ Addition
NAME	WOLPER, BARRY M.	32 NAME	Douglas, Thomas S.	
STREET ADDRESS	405 LEXINGTON AVE, 54 FL	33 STREET ADDRESS	130 Mason St.	
CITY-ST-ZIP	NEW YORK NY 10174	34 CITY-ST-ZIP	Greenwich CT 06830	
TITLE	S	41 TITLE	S	☐ Change ☒ Addition
NAME	MCDONNELL, HEATHER L	42 NAME	Mangan, Michael F.	
STREET ADDRESS	405 LEXINGTON AVE, 54 FL	43 STREET ADDRESS	130 Mason Street	
CITY-ST-ZIP	NEW YORK NY 10174	44 CITY-ST-ZIP	Greenwich CT 06830	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] MICHAEL F. MANGAN (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 3-10-95 (Date) (203) 629-0905 (Daytime Phone)

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