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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P28645 (0)

1. Corporation Name
O'BRIEN & GERE LABORATORIES, INC.

Principal Place of Business
5000 BRITTONFIELD PARKWAY
P.O. BOX 4942
SYRACUSE NY 13221

Mailing Address
5000 BRITTONFIELD PARKWAY
P.O. BOX 4942
SYRACUSE NY 13221-4942



3. Date Incorporated or Qualified 03/27/1990
3a. Date of Last Report 03/15/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		16-1272341		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input 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
82 Street Address (P.O. Box Number is Not Acceptable)
83
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

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	D LOVELAND, JOHN R.	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	150 CEDAR HEIGHTS DR.	1.2 NAME	
STREET ADDRESS	JAMESVILLE NY	1.3 STREET ADDRESS	
CITY- ST- ZIP	CD	1.4 CITY- ST- ZIP	
TITLE	MURPHY, CORNELIUS B., JR	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4454 KASSON ROAD	2.2 NAME	
STREET ADDRESS	SYRACUSE NY	2.3 STREET ADDRESS	
CITY- ST- ZIP	TD	2.4 CITY- ST- ZIP	
TITLE	JOHNSON, PETER C.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1512 N. BEECHAM DRIVE	3.2 NAME	
STREET ADDRESS	AMBLER PA	3.3 STREET ADDRESS	
CITY- ST- ZIP	VD	3.4 CITY- ST- ZIP	
TITLE	HILL, DAVID R.	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	705 STANDISH DRIVE	4.2 NAME	
STREET ADDRESS	SYRACUSE NY	4.3 STREET ADDRESS	
CITY- ST- ZIP	PD	4.4 CITY- ST- ZIP	
TITLE	TIFFT, EDWIN C., JR.	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	221 WINDCREST DRIVE	5.2 NAME	
STREET ADDRESS	CAMILLUS NY	5.3 STREET ADDRESS	
CITY- ST- ZIP	D	5.4 CITY- ST- ZIP	
TITLE	GIDLOW, BRIEN N.	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9 COLLIN AVENUE	6.2 NAME	
STREET ADDRESS	FAYETTEVILLE NY	6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

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 *Stephen A. Kurud, Jr.* Stephen A. Kurud, Jr., Secretary

4/25/97 (315)437-6100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

0497224

CR2E034 (9/96)

**O'BRIEN & GERE LABORATORIES, INC.
DIRECTORS AND OFFICERS**

Cornelius B. Murphy, Jr. ✓	Chairman of the Board Director	4454 Kasson Road Syracuse, NY 13215
David R. Hill ✓	President & Director	705 Standish Drive Syracuse, NY 13224
Peter C. Johnson ✓	Treasurer & Director	1512 North Beecham Drive Ambler, PA 19002
Joseph M. McNulty	Assistant Treasurer	7329 Lakeshore Road Cicero, NY 13039
Stephen A. Kuruc, Jr.	Secretary	4951 Harvest Lane Liverpool, NY 13088
Dennis S. Lerner	Assistant Secretary/Counsel	106 Scottholm Boulevard Syracuse, NY 13224
John R. Loveland ✓	Director	150 Cedar Heights Drive Jamesville, NY 13078
Gary N. Kirsch	Director	2022 Deer Run Road LaFayette, NY 13084
Swiatoslav W. Kaczmar	Director	400 Scottholm Boulevard Syracuse, NY 13224
Steven J. Roland	Director	10 Auryansen Court Closter, NJ 07624
Michael N. Petterelli	Vice President	5102 Duguid Road Manlius, NY 13104