

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

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Mar 06 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 # P31275 (1)

1. Corporation Name
MM MOORING #3 CORP.

Principal Place of Business
ONE MARINE MIDLAND CENTER
15TH FL.
BUFFALO NY 14203

Mailing Address
ONE MARINE MIDLAND CENTER
15TH FL.
BUFFALO NY 14203-2842



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/11/1990		3a. Date of Last Report 02/14/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 16-1382412		Applied For 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 checked="" type="checkbox"/> 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 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P HANNAN, W.K. J	1.1 TITLE	PRESIDENT
NAME	1 MARINE MIDLAND CENTER	1.2 NAME	KARLSSON, LEIF B.
STREET ADDRESS	BUFFALO, NY	1.3 STREET ADDRESS	1 MARINE MIDLAND CTR.
CITY-ST-ZIP	VP	1.4 CITY-ST-ZIP	BUFFALO, NY 14203
TITLE	LENNARTZ, ROBERT J.	2.1 TITLE	
NAME	1 MARINE MIDLAND CENTER	2.2 NAME	
STREET ADDRESS	BUFFALO, NY	2.3 STREET ADDRESS	
CITY-ST-ZIP	VP	2.4 CITY-ST-ZIP	
TITLE	WINTER, ROBERT J.	3.1 TITLE	
NAME	1 MARINE MIDLAND CENTER	3.2 NAME	
STREET ADDRESS	BUFFALO, NY	3.3 STREET ADDRESS	
CITY-ST-ZIP	T	3.4 CITY-ST-ZIP	
TITLE	SOMMER, MARY B.	4.1 TITLE	
NAME	1 MARINE MIDLAND CENTER	4.2 NAME	
STREET ADDRESS	BUFFALO, NY	4.3 STREET ADDRESS	
CITY-ST-ZIP	DS	4.4 CITY-ST-ZIP	
TITLE	TOOHEY, PHILIP S.	5.1 TITLE	
NAME	1 MARINE MIDLAND CENTER	5.2 NAME	
STREET ADDRESS	BUFFALO, NY	5.3 STREET ADDRESS	
CITY-ST-ZIP	AST	5.4 CITY-ST-ZIP	
TITLE	RICH, RICHARD P.	6.1 TITLE	
NAME	1 MARINE MIDLAND CENTER	6.2 NAME	
STREET ADDRESS	BUFFALO 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:  DATE: 7/68412153

CR2E034 (9/96)