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FILED  
May 09 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 # P95000020150 (5)  
1. Corporation Name  
DELAWARE NORTH PARKS SERVICES OF SPACEPORT, INC.



Principal Place of Business  
438 MAIN ST.  
BUFFALO NY 14202

Mailing Address  
438 MAIN ST.  
BUFFALO NY 14202-3207

3. Date Incorporated or Qualified  
03/13/1995

3a. Date of Last Report  
04/16/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
16-1476829

Applied For  
Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23. City & State

28. City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24. Zip

25. Country

29. Zip

30. Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
TALLAHASSEE FL 33324

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 ☐ DELETE

1.1 TITLE ☐ Change ☒ Addition

NAME RICK ABRAMSON  
STREET ADDRESS DELAWARE NORTH PARK SERVICES  
CITY-ST-ZIP KENNEDY SPACE CTR FL

1.2 NAME SZEFEI, DENNIS J.  
1.3 STREET ADDRESS 438 MAIN ST  
1.4 CITY-ST-ZIP BUFFALO, NY

TITLE ☒ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME G. GAIL EDWARDS  
STREET ADDRESS 438 MAIN ST  
CITY-ST-ZIP BUFFALO NY

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME JANIS R. TRYBUS  
STREET ADDRESS 438 MAIN ST  
CITY-ST-ZIP BUFFALO NY

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME JESSICA RAHUBA  
STREET ADDRESS 438 MAIN ST  
CITY-ST-ZIP BUFFALO NY

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME JEREMY M. JACOBS, JR.  
STREET ADDRESS 438 MAIN ST  
CITY-ST-ZIP BUFFALO NY

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME BRYAN J. KELLER  
STREET ADDRESS 438 MAIN ST  
CITY-ST-ZIP BUFFALO NY

6.2 NAME  
6.3 STREET ADDRESS  
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

JANIS R. TRYBUS 4/16/97 (716) 858-5000

CR2E034 (9/96)