

Apr 21 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # P96000005498 (6)</b>			
<b>1. Corporation Name</b> <b>ORLANDO BUS REALTY, INC.</b>			
Principal Place of Business		Mailing Address	
<b>46 PUBLIC SQUARE</b> <b>WILKES-BARRE PA 18701</b> XXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXX		<b>46 PUBLIC SQUARE</b> <b>WILKES-BARRE PA 18701-2808</b> XXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>	
<b>21</b> Suite, Apt. #, etc:		<b>26</b> <b>239 OLD RIVER ROAD</b>	
<b>22</b> City & State		<b>27</b> City & State	
<b>23</b> Zip Country		<b>28</b> <b>WILKES-BARRE, PA</b>	
<b>24</b> <b>25</b>		<b>29</b> <b>18702</b> <b>30</b>	
<b>9. Name and Address of Current Registered Agent</b>			
<b>TERRY, DAVID E</b> <b>255 S ORANGE AVE</b> <b>SUITE 1501</b> <b>ORLANDO FL 32801</b>			<b>81</b> Name  <b>82</b> Street Address  <b>83</b>  <b>84</b> City
<b>11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida. Such change was authorized by the corporate agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</b>			
SIGNATURE _____			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required.)			
<b>OFFICERS AND DIRECTORS</b>			
<b>12.</b>		<b>13.</b>	
TITLE	<b>D</b>	1.1 TITLE	<b>PRESIDENT</b>
NAME	<b>HENRY, FRANK M</b>	1.2 NAME	
STREET ADDRESS	<b>46 PUBLIC SQUARE</b>	1.3 STREET ADDRESS	<b>23 WILKES BARRE</b>
CITY - ST - ZIP	<b>WILKES-BARRE PA 18701</b>	1.4 CITY - ST - ZIP	<b>WI PA 18701</b>
TITLE		2.1 TITLE	<b>VICE PRESIDENT</b>
NAME		2.2 NAME	<b>HARRIS, JAMES L</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>23 WILKES BARRE</b>
CITY - ST - ZIP		2.4 CITY - ST - ZIP	<b>WI PA 18701</b>
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	
<b>14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Block 12 or Block 13 if changed or on an attachment with an address.</b>			
SIGNATURE: _____			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			