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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000014915 (8)

ERIE LACKAWANNA RAILROAD CO.

Principal Place of Business Mailing Address 234 CENTRAL AVE HACKENSACK NJ 07801 TALLAHASSEE FL 32302 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 22-3502612 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζıρ Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **5088 TALLOW POINT ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32308 83 84 Zip Code City 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Statu 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, typed or printed isone of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition 1 1 1 III F TITLE BELL, PHILLIP L 1.2 NAME NAME 5088 TALLOW PT. RD STREET ADDRESS 1.3 STREET ADDRESS TALLAHASSEE FL

CITY-ST-ZIP 1.4 CITY - ST - ZIP DFLETE Addition 21 TITLE Change TITLE WOODFORD, PHYLLIS B 2.2 NAME NAME 274 HIGH ST 23 STREET ADDRESS STREET ADDRESS HACKENSACK NJ 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3 1 TITLE Addition TITLE 3 2 NAME NAME 33 STREET ADDRESS STREET AODRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP Change TIFLE DELETE 41 TITLE Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP B0000250452Bhange DELETE Addition TITLE 5.1 TITLE +04/29/98--01014--003 NAME 5.2 NAME ***150.00 5 3 STREET ADDRESS STREET ADORESS 5.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition T/D F NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 suppliemental 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

6 4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

3/24/98

FILED

Apr 28 1998 8:00am

Secretary of State

(450) 668-0452