

2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 820890

Entity Name: DELAWARE NORTH COMPANIES SPORTSERVICE, INC.**Current Principal Place of Business:**250 DELAWARE AVENUE
BUFFALO, NY 14202**Current Mailing Address:**250 DELAWARE AVENUE
12TH FLOOR - LICENSING
BUFFALO, NY 14202 US**FEI Number:** 16-0848422**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title S
Name TRYBUS, JANICE R
Address 100 LEGENDS WAY
City-State-Zip: BOSTON MA 02114

Title PRESIDENT
Name BERNAL, CARLOS P
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title SVP
Name FREILICHER, BARRY H
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name HESS, JEFFREY A
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title D
Name FEENEY, CHRISTOPHER J
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title COO
Name SCHNEIDER, RICHARD R
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name FETCHO, DANIEL E
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name LIBERTO, NICHOLAS D
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLAS D LIBERTO

VP

07/07/2017

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP
Name OLSON, THOMAS
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name STIB, TIMOTHY M
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name VERESPIE, JOHN J
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name SIMS, JOSEPH M
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title VP
Name THORMEIER, ROBERT C
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202

Title TREASURER
Name HART, GLENN T
Address 250 DELAWARE AVENUE
City-State-Zip: BUFFALO NY 14202