SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F29733

(5)

FILED Sep 17 1997 8:00am Secretary of State

CABLE SENTRY CORPORATION					
				1 18 3 11 2 8 11 18 1 1 3 14 14 14 14 14 14 1	## ##### #############################
Principal Plac	e of Business	Mailing Address			
P.O. BOX 472 P.O. BOX 472					
5 WEST THIRD STREET 5 WEST THIRD STREET COUDERSPORT PA 16915 COUDERSPORT PA 16915			DO NOT WRITE	E IN THIS SPACE	
				3. Date Incorporated or Qualified	3a. Date of Last Report
Ţ				04/29/1981	11/01/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2500		L 26 2500 N TAI	MIAMI TRAIL	59-2114470	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 # 2		27 # 221			Fee Required
City & State		City & State	F۱	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pr	
24 3410	3 25 USA		30 UJA	Personal Property Tax due June	-
	9. Name and Address of Current			10. Name and Address of New Re	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. B1 Name					
1201 HAYS STREET			82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
TAL	LAHASSEE FL 32301			(ioi box (idinoci io itor rocopia	
ļ			83		
1	•		84 City		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		TO TO			DATE
12.	Signature, typed or printed name of registered agor OFFICERS AND		Registered Agent signature requi	ADDITIONS/CHANGES TO OFFI	
TITLE	DP	DELETE	1.1 TITLE		Change Addition
NAME	RIGAS, JOHN J		1.2 NAME		
STREET ADDRESS	5 WEST THIRD STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	COUDERSPORT PA 16915		1.4 CITY - ST - ZIP		
TITLE	VO	DELETE	2.1 TITLE		Change Addition
NAME	RIGAS, MICHAEL J		2.2 NAME		
STREET ADDRESS	\$ WEST THIRD STREET		2 3 STREET ADDRESS		
CITY-ST-ZIP	COUDERSPORT PA 16915	Decrete	2 4 CITY-ST-ZIP		
TITLE	VID	☐ DELETE	3.1 TITLE		Change Addition
NAME	RIGAS, TIMOTHY J 5 West Third Street		3.2 NAME		
STREET ADDRESS	COUDERSPORT PA 16915		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VD	DELETE	3.4. GITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME	RIGAS, JAMES P		4. 2 NAME		
STREET ADDRESS	5 WEST THIRD STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP	COUDERSPORT PA 16915		4.4 CITY-ST-ZIP		
TITLE	DVS	DEFELE	5.1 TITLE		Change Addition
NAME	MILLIARD, DANIEL R		5.2 NAME		
STREET ADDRESS	5 WEST THIRD STREET		5.3 STREET ADDRESS		
CITY-ST-ZIP	COUDERSPORT PA 16915		5.4 CITY-ST-ZIP		
TITLE	VAS	☐ DELETE	6.1 TITLE		Change Addition
NAME	FISHER, RANDALL D		6.2 NAME		
STREET ADDRESS	5 WEST THIRD STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	COUDERSPORT RA 16915		64 CITY-ST-ZIP		

4. I do hereby certify that the information supplied with this filing does not qualify for the exceptation stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in 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 register optrustee empowhers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 d. Block 13 if changed, or on an attacknown with an idealess.

SIGNATURE: