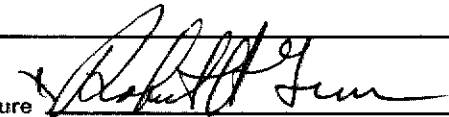
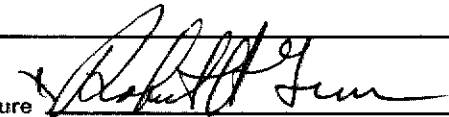
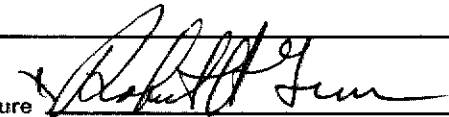


NO. C120416	Annual Report Form 1998 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE *	1. Mailing Address - Please Correct, If Not Correct UNITED CEREBRAL PALSY ASSOCI 1660 L ST NW STE 700 WASHINGTON DC 20036		CT CORPORATION SYSTEM 300 N 6TH ST BOISE ID 83701 3. Organized Under the Laws of: NY C120416													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td colspan="6" style="text-align: center;">SEE ATTACHED LISTING.</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	SEE ATTACHED LISTING.					
Office held	Name	Street or P.O. Address	City	State	Zip											
SEE ATTACHED LISTING.																
5. Signature of New Registered Agent		6. <table border="0"> <tr> <td>Signature</td> <td></td> <td>Date</td> <td colspan="2">09/18/98</td> </tr> <tr> <td>Name (Typed or Printed)</td> <td>ROBERT H. GROSS</td> <td>Title</td> <td colspan="2">CHIEF FINANCIAL OFFICER</td> </tr> </table>			Signature		Date	09/18/98		Name (Typed or Printed)	ROBERT H. GROSS	Title	CHIEF FINANCIAL OFFICER			
Signature		Date	09/18/98													
Name (Typed or Printed)	ROBERT H. GROSS	Title	CHIEF FINANCIAL OFFICER													

ISSUED: 07-03-1998

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1371

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