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Jul 07 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F92000000705 (5)

1. Corporation Name  
SYSTEMS SOFTWARE STANDARDS, LTD. INCORPORATED

Principal Place of Business:  
600 LYNNHAVEN PKWY, STE 216  
VIRGINIA BEACH VA 23451-7319  
US

Mailing Address:  
600 LYNNHAVEN PKWY,  
SUITE 216  
VIRGINIA BEACH VA 23452-7397  
US



2. Principal Place of Business:

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address:

26 Suite, Apt #, etc

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

TROCHE, JOSE L  
70 BELLAIRE DRIVE  
PALM COAST FL 32037

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City

FL 85 Zip Code

3. Date Incorporated or Qualified 12/15/1992  
3a. Date of Last Report 05/01/1996  
4. FEI Number 54-1303938 Applied For Not Applicable  
5. Certificate of Status Desired [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution [ ] \$5.00 May Be Added to fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [X] No  
10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0802 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		(NAME, Title or printed name of registered agent, and title if applicable)	(NAME, Registered Agent signature, and title if applicable)	DATE
<b>12. OFFICERS AND DIRECTORS</b>				
TITLE	V	[ ] DELETE	<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	[ ] Change [ ] Addition
NAME	DOUGHERTY, MICHAEL		1.1 TITLE	
STREET ADDRESS	631 LYNN SHORES DRIVE		1.2 NAME	
CITY - ST - ZIP	VA BEACH BA		1.3 STREET ADDRESS	
TITLE	V	[ ] DELETE	1.4 CITY - ST - ZIP	
NAME	VAN BUREN, PATTI		2.1 TITLE	Vice President [X] Change [ ] Addition
STREET ADDRESS	1905 ANNANDALE CT		2.2 NAME	Patti Van Buren
CITY - ST - ZIP	VA BEACH VA		2.3 STREET ADDRESS	2148 Southcross Dr.
TITLE	CP	[ ] DELETE	2.4 CITY - ST - ZIP	Virginia Beach VA 23456
NAME	CASANOVA, WILLIAM		3.1 TITLE	[ ] Change [ ] Addition
STREET ADDRESS	2508 ESCORIAL CT		3.2 NAME	
CITY - ST - ZIP	VA BEACH VA		3.3 STREET ADDRESS	
TITLE	DST	[ ] DELETE	3.4 CITY - ST - ZIP	
NAME	CASANOVA, ALMA		4.1 TITLE	[ ] Change [ ] Addition
STREET ADDRESS	2508 ESCORIAL CT		4.2 NAME	
CITY - ST - ZIP	VA BEACH VA		4.3 STREET ADDRESS	
TITLE		[ ] DELETE	4.4 CITY - ST - ZIP	
NAME			5.1 TITLE	[ ] Change [ ] Addition
STREET ADDRESS			5.2 NAME	
CITY - ST - ZIP			5.3 STREET ADDRESS	
TITLE		[ ] DELETE	5.4 CITY - ST - ZIP	
NAME			6.1 TITLE	[ ] Change [ ] Addition
STREET ADDRESS			6.2 NAME	
CITY - ST - ZIP			6.3 STREET ADDRESS	
TITLE		[ ] DELETE	6.4 CITY - ST - ZIP	
NAME				
STREET ADDRESS				
CITY - ST - ZIP				

14. I do hereby 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address:

SIGNATURE: Patti Van Buren Patti Van Buren 10/27/97 757-463-7520

CR2E034 (9/96)