

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F94000005905 (4)**

1. Corporation Name

FEDERATED SYSTEMS GROUP, INC.



Principal Place of Business

Mailing Address

7 WEST SEVENTH ST.
CINCINNATI OH 45202

7 WEST SEVENTH ST.
CINCINNATI OH 45202

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified
11/15/1994

3a. Date of Last Report
01/27/1995

4. FEI Number
31-1419869

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 No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DV	<input type="checkbox"/> DELETE
NAME	BRODERICK, DENNIS J	
STREET ADDRESS	7 WEST SEVENTH ST.	
CITY-ST-ZIP	CINCINNATI OH 45202	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	SIMS, JOHN R	
STREET ADDRESS	7 WEST SEVENTH ST.	
CITY-ST-ZIP	CINCINNATI OH 45202	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	ZIMMERMAN, JAMES M	
STREET ADDRESS	7 WEST SEVENTH ST.	
CITY-ST-ZIP	CINCINNATI OH 45202	
TITLE	P	<input type="checkbox"/> DELETE
NAME	HONIG, LAWRENCE E	
STREET ADDRESS	6801 GOVERNORS PKWY., BLDG. 200, STE. 500	
CITY-ST-ZIP	NORCROSS GA 30071	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SEPPELT, ROBERT C	
STREET ADDRESS	7 WEST SEVENTH ST.	
CITY-ST-ZIP	CINCINNATI OH 45202	
TITLE	TAS	<input type="checkbox"/> DELETE
NAME	HOGUET, KAREN M	
STREET ADDRESS	7 WEST SEVENTH ST.	
CITY-ST-ZIP	CINCINNATI OH 45202	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Jack B. Cox* Assistant Secretary **Jack B. Cox** 1/19/96 (513) 579-7311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)

Federated Systems Group, Inc.

Directors:

Dennis J. Broderick
John R. Sims
James M. Zimmerman

Officers:

James M. Zimmerman	Chairman
Lawrence E. Honig	President(1)
John R. Sims	Vice President & Secretary
Dennis J. Broderick	Vice President
Robert C. Seppelt	Vice President
Gary J. Nay	Vice President
Karen M. Hogue	Treasurer & Assistant Secretary
Jack B. Cox	Assistant Secretary
Klaus M. Ziermaier	Assistant Secretary

(1) 6801 Governors Pkwy., Bldg. 200, Suite 500, Norcross, GA 30071

Address: 7 West Seventh Street
Cincinnati, Ohio 45202