FILED

2001 UNIFORM BUSINESS REPORT BUBRI

## Jul 24, 2001 8:00 am Secretary of State F97000004209 DOCUMENT # 1. Entity Name 07-24-2001 90041 046 \*\*\*550.00 ACHIEVE SOFTWARE CORPORATION Principal Place of Business Mailing Address 315 W. JEFFERSON BLVD. 315 W. JEFFERSON BLVD. SOUTH BEND IN 46601 SOUTH BEND IN 46601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 31-1402041 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C.T. CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** City Zip Code 8. 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After September 12, 2001, Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (5/01) Addition TITLE **CEOP** ☐ Delete TI GARATONI, LAWRENCE H NAME 315 W. JEFFERSON BLVD. ET ADDRESS STREET ADDRESS CITY-ST-ZIP SOUTH BEND IN 46601 ST-ZIP ☐ Addition TITLE ☐ Delete Change NAME WRIGHT, ANTHONY STREET ADDRESS ET ADDRESS 315 W. JEFFERSON BLVD. CITY-ST-ZIP SOUTH BEND IN 46601 ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME LOESER, CHARLES M STREET ADDRESS ET ADDRESS 315 W. JEFFERSON BLVD. CITY-ST-ZIP ST-ZIP SOUTH BEND IN 46601 Delete Change ☐ Addition TITLE NAME HUNT, MARY M STREET ADDRESS ET ADDRESS 315 W. JEFFERSON BLVD. CITY-ST-ZIP -ST-ZIP SOUTH BEND IN 46601 Change ☐ Addition TITLE Delete NAME STREET ADDRESS ET ADDRESS CITY-ST-ZIP ST-ZIP Delete Change Addition NAME STREET ADDRESS T ADDRESS CITY-ST-7IP ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exindicated on this report or supplemental report is true and accurate and that my sign of the corporation or the receiver or trustee empowered to execute this report as requested, or on an attachment with an address, with all other like empowered. nption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ure shall have the same legal effect as if made under oath; that I am an officer or director ed by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if