

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000006419

FILED
Jan 30, 2003
Secretary of State

Entity Name: MADE2MANAGE SYSTEMS, INC.

Current Principal Place of Business:

9002 PURDUE ROAD
INDIANAPOLIS, IN 46268

New Principal Place of Business:

Current Mailing Address:

9002 PURDUE ROAD
INDIANAPOLIS, IN 46268

New Mailing Address:

FEI Number: 35-1665080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: WORTMAN, DAVID B
Address: 9002 PURDUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46268

Title: TSCF () Delete
Name: DOLAN, TRACI
Address: 9002 PURDUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46268

Title: AS () Delete
Name: KINDER, KATHERINE
Address: 9002 PURDUE ROAD
City-St-Zip: INDIANAPOLIS, IN 46268

Title: D () Delete
Name: CULLINANE, MICHAEL P
Address: 1815 SOUTH MEYERS ROAD
City-St-Zip: OAKBROOK TERRACE, IL 601815241

Title: D () Delete
Name: DAVENPORT, TIM
Address: 801 LEIGH MILL ROAD
City-St-Zip: GREAT FALLS, VA 22066

Title: D () Delete
Name: HALPERIN, RICHARD
Address: 641 GOLF ROAD
City-St-Zip: CRYSTAL LAKE, IL 60014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE KINDER

AS

01/30/2003

Electronic Signature of Signing Officer or Director

Date

RUDY HERRMANN, DIRECTOR
5809 SOUTH INDIANAPOLIS
TULSA, OK 74135