

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 15, 2002 8:00 am
Secretary of State

0141047 AB

DOCUMENT # **P96000023455**

1. Entity Name
EXCELIS, INC.

09-15-2002 90088 047 ***550.00

Principal Place of Business
8435 STEMMONS FREEWAY
DALLAS TX 75247-3907
US

Mailing Address
1 FIRST AMERICAN WAY
SANTA ANA CA 92707



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number **59-3371395**
 Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNEDY, PARKER S 114 FIFTH STREET SANTA ANA CA 92701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, JOHN W 150 SECOND AVENUE NORTH SUITE 1600 ST. PETERSBURG FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ZINDA, CRAIG J 150 SECOND AVENUE NORTH SUITE 1600 ST. PETERSBURG FL 33701	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ABIDE, RAYMOND G JR 8435 STEMMONS FREEWAY DALLAS TX 75247-3907	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANDO, BARRY M 8435 STEMMONS FREEWAY DALLAS TX 75247	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRABKA, GARY D. 100 Mulberry Street Newark, NJ 07102	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO RIFFE, C. CLARK 8435 N. Stemmons Freeway Dallas, TX 75247	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KATHLEEN M. COLLINS 1 First American Way Santa Ana, CA 92707	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP WRIGHT, KIMBERLY A. 8435 N. Stemmons Freeway Dallas, TX 75247	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP DANILUK, WILLIAM J. 8435 N. Stemmons Freeway Dallas, TX 75247	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SPRINKLE, JON P. 8435 N. Stemmons Freeway Dallas, TX 75247	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kathleen M. Collins* Kathleen M. Collins 9/12/2002 800/854-3643
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E03 (4/01)



Attachment
980554

First American Title Insurance Company

1 First American Way • Santa Ana, California 92707 • (714) 800-3000 • (800) 854-3643
www.firstam.com • NYSE: FAF

September 12, 2002

Divisions of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

VIA FEDERAL EXPRESS

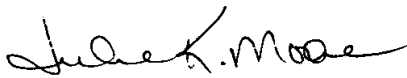
RE: **Excelis, Inc.**
Document # P96000023455

Dear Sir or Madam:

Enclosed please find the 2002 Uniform Business Report (UBR) for Excelis, Inc., and a check in the amount of \$550.00, payable to Florida Department of State, for the filing fee.

Thank you for your assistance in processing this information.

Very truly yours,


Julie K. Moore
Legal Assistant

Enclosures