

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 07, 2001 8:00 am**  
**Secretary of State**

02-07-2001 90196 013 \*\*\*150.00

C 1624

**DOCUMENT # P99000109145**

1. Entity Name  
**FLA-CGI, INC.**

Principal Place of Business  
**222 LAKEVIEW AVE., 17TH FLOOR**  
**WEST PALM BEACH FL 33401**

Mailing Address  
**222 LAKEVIEW AVE., 17TH FLOOR**  
**WEST PALM BEACH FL 33401**

2. Principal Place of Business  
**Gardens Corporate Center**  
**3801 PGA Boulevard, Suite 555**  
**Palm Beach Gardens, FL 33410**

3. Mailing Address  
**Gardens Corporate Center**  
**3801 PGA Boulevard, Suite 555**  
**Palm Beach Gardens, FL 33410**



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0968169** Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**REGSERV CORP.**  
**222 LAKEVIEW AVE., 17TH FLOOR**  
**WEST PALM BEACH FL 33401**

**7. Name and Address of New Registered Agent**

**REGSERV CORP.**  
**Gardens Corporate Center**  
**3801 PGA Boulevard, Suite 555**  
**Palm Beach Gardens, FL 33410**

**FL** Zip Code

8. The above  
**REGSERV CORP.**

Office or registered agent, or both, in the State of Florida.

SIGNATURE By: *Lawrence J. Diamond*  
**Lawrence J. Diamond, Vice President**

(Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **D**  Delete  
 NAME **RENDINA, BRUCE A**  
 STREET ADDRESS **222 LAKEVIEW AVE., 17TH FLOOR**  
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **DP**  Change  Addition  
 NAME **Bruce A Rendina**  
 STREET ADDRESS **Gardens Corporate Center**  
 CITY-ST-ZIP **3801 PGA Boulevard, Suite 555**  
**Palm Beach Gardens, FL 33410**

TITLE **D**  Delete  
 NAME **FERRUCCI, MARK A**  
 STREET ADDRESS **1209 ORANGE STREET**  
 CITY-ST-ZIP **WILMINGTON DE 19801**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VPST**  Delete  
 NAME **DISALVO, PATRICK J**  
 STREET ADDRESS **222 LAKEVIEW AVE, 17TH FLOOR**  
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **VPST**  Change  Addition  
 NAME **Patrick J. DiSalvo**  
 STREET ADDRESS **Gardens Corporate Center**  
 CITY-ST-ZIP **3801 PGA Boulevard, Suite 555**  
**Palm Beach Gardens, FL 33410**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VPAS**  Change  Addition  
 NAME **Lawrence B. Juran**  
 STREET ADDRESS **Gardens Corporate Center**  
 CITY-ST-ZIP **3801 PGA Boulevard, Suite 555**  
**Palm Beach Gardens, FL 33410**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:**

*Patrick J. DiSalvo*

**Patrick J. DiSalvo**  
 Vice President

**(561) 630-5055**

Date

Daytime Phone #

CR2E034 (10/00)