

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P32583 (7)**
1. Corporation Name
EDS PERSONAL COMMUNICATIONS CORPORATION



Principal Place of Business: **5400 LEGACY DRIVE HI 4A 66 PLANO TX 75024**
Mailing Address: **5400 LEGACY DRIVE HI 4A 66 PLANO TX 75024**

3. Date Incorporated or Qualified: **12/31/1990** 3a. Date of Last Report: **02/07/1995**
4. FEI Number: **04-2923377** 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

2. Principal Place of Business: 21 [] 2a. Mailing Address: 26 []
Suite, Apt. #, etc.: 22 [] Subc. Apt. #, etc.: 27 []
City & State: 23 [] City & State: 28 []
Zip: 24 [] Country: 25 [] Zip: 29 [] Country: 30 []

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
81 Name: []
82 Street Address (P.O. Box Number is Not Acceptable): []
83 []
84 City: [] 85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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 607.0500, Florida Statutes.

SIGNATURE: [] DATE: []

12. OFFICERS AND DIRECTORS

TITLE	CP	[] DELETE
NAME	HARRIS, JOHN R	
STREET ADDRESS	5400 LEGACY DR.	
CITY-STATE-ZIP	PLANO TX	
TITLE	V	[X] DELETE
NAME	GUDONIS, PAUL R.	
STREET ADDRESS	5400 LEGACY DR.	
CITY-STATE-ZIP	PLANO TX	
TITLE	T	[] DELETE
NAME	BENAC, WILLIAM P	
STREET ADDRESS	5400 LEGACY DR.	
CITY-STATE-ZIP	PLANO TX	
TITLE	VD	[X] DELETE
NAME	SPAGNOLO, MARK F.	
STREET ADDRESS	5400 LEGACY DR.	
CITY-STATE-ZIP	PLANO TX	
TITLE	AT	[X] DELETE
NAME	RAMSEY, LARRY L	
STREET ADDRESS	5400 LEGACY DR.	
CITY-STATE-ZIP	PLANO TX	
TITLE	D	[] DELETE
NAME	HELLER, JEFFREY M	
STREET ADDRESS	5400 LEGACY DR.	
CITY-STATE-ZIP	PLANO TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	[X] Change [] Addition
22 NAME	JEFFREY D. CUSHMAN
23 STREET ADDRESS	5400 LEGACY DRIVE
24 CITY-STATE-ZIP	PLANO, TX 75024
31 TITLE	[] Change [] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	[X] Change [] Addition
42 NAME	VD
43 STREET ADDRESS	BRUCE T. LEONARD
44 CITY-STATE-ZIP	5400 LEGACY DRIVE
51 TITLE	[X] Change [] Addition
52 NAME	AT
53 STREET ADDRESS	R. RANDALL CAPPS
54 CITY-STATE-ZIP	5400 LEGACY DRIVE
61 TITLE	[] Change [] Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-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(6)(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: **R. Randall Capps** R-RANDALL CAPPS 3/28/96 214-665-1200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)