FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

F95000004423 (8)

NEXUS SOFTWARE OF NORTH CAROLINA, INCORPORATED

| Principal Place of Business | | Mailing Address | Mailing Address | | 18111 DOMA BONT BARN GIDED HIGGE KIR 1881 |
|--|--|---|--|--|--|
| 4020 WESTCHASE BLVD #220 RALEIGH NC 27607 | | 4020 WESTCHASE BLVD #220 RALEIGH NC 27607-3992 | | | |
| | | | | 3. Date Incorporated or Qualified | i 3a. Date of Last Report |
| | | | | 09/13/1995 | 01/30/1996 |
| · · | hace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| Suite Apt | # 21. | Suite, Apt. #, etc. | <u>.</u> | 56-1469651 | Not Applicable |
| 22 | | 27 | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | e | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Z₁p 24 | Country 25 | Zip 29 | Country 30 | 8. This corporation has liability for Florida Statutes | |
| | 9. Name and Address of Curri | | 30] | 10. Name and Address of New F | |
| WA | RREN, CHARLES N | | 81 Name | The second secon | |
| | P. LINTON BLVD., #304A | | 00 0 | (0.0.0. | |
| 100 E. LINTON BLVD., #304A B2 Street Address (P.O. Box Number is Not Acceptable) DELRAY BEACH FL 33483 | | | | | |
| UCI | LIAT BEAUTI PL 33403 | | 83 | | |
| | | | | | |
| | | | 84 City | | FL 85 Zip Code |
| 11. Pursuant office or ragent. La | to the provisions of Sections 607.05 registered agent, or both, in the Sta im familiar with, and accept the obli | 002 and 607,1508, Florida Statute te of Florida Such change was a gations of Section 607,0505, Flor | s, the above-named uthorized by the corp rida Statutes | corporation submits this statement for the poration's board of directors. I hereby acc | purpose of changing its registered ept the appointment as registered |
| SIGNATURE | , | g | inos ottados. | | |
| | Signature, typed or perten name of regedered a | gent and title if applicable (NOTE | : Registered Agent signature | a required when reinstating) | DATE |
| 12. | OFFICERS A | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFF | |
| TITLE | P | ☐ DELETE | 1.1 TITLE | | Change Addition |
| NAME | LIPPARD, PHILIP | | 1.2 NAME | | |
| STREET ADDRESS | 4020 WESTCHASE BLVD., 4 | 220 | 1.3 STREET ADDRESS | | |
| City-St-ZiP | RALEIGH NC 27607 | Detiere | 1.4 CITY - ST - ZIP | | |
| TITLE | DC | DELETE | 2.1 TITLE | | Change Addition |
| NAME CTAGE LADDRESS | BRADLEY, JAMES | | 2.2 NAME | | • |
| STHEET ADDRESS | 2501 WOOTEN BLVD. | | 2.3 STREET ADDRESS | | |
| CITY-ST-7:P TITLE | WILSON NC 27893 | DELETE | 2. 4 CITY - ST - ZIP | CC000700V | Change Addition |
| NAME | | [DETER | 3.1 TITLE | SECRETARY SUSAN A BASH | _ · _ |
| STREET ADDRESS | | | 3.2 NAME | 4020 WESTCHASE BLY | D # 220 |
| CITY-ST-ZiP | | | 3.3 STREET ADDRESS | PALEIGH, DC 27607 | |
| 1/ILE | | DELETE | 3.4. CITY - ST - ZIP 4.1 TITLE | MILEIUM, DC 27607 | Change Addition |
| NAME | | | 4. 2 NAME | | Transpo transport |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST ZIP | | | 4.4 CITY - ST - ZIP | 1 | |
| TITLE | 1 | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | , | |
| CITY - S1 - 20 | | | 5.4 CITY - ST - ZIP | | |
| TITLE | | DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | li | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY+S1+ZiP | | | 6.4 CITY - ST - ZIP | | |
| 14. I do herel | by certify that the information supplies indicated on the popular record of | ed with this filing does not qualify | for the exemption s | stated in Section 119.07(3)(i), Florida Statu I that my signature shall have the same le | les. I further certify that the |
| ramano | fficer or clirector of the corporation in Block 12 or Block 13 if changed | or the receiver or trustee empowe | ered to execute this i | o that my signature shall have the same let report as required by Chapter 607, Florida | an ellect as it made under path; that Statutes; and that my name |

SIGNATURE

lusan Walsalel

SUSAN A BABASH

1)15/97

919-832-8330

Daytime Phone #

FILED

Jan 23 1997 8:00am

Secretary of State