

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P31032** (6)

1. Corporation Name

TRIAD GOVERNMENTAL SYSTEMS, INC.

Principal Place of Business

**358 SOUTH MONROE STREET
XENIA OH 45385**

Mailing Address

**358 SOUTH MONROE STREET
XENIA OH 45385**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/24/1990

4. FEI Number

31-1087810

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**WRIGHT, WILSON W.
217 SOUTH ADAMS STREET
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

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, type or printed name of registered agent and the Corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	STD	☒ DELETE
NAME	RAPP, JANET I	
STREET ADDRESS	129 PARK DRIVE	
CITY-ST-ZIP	XENIA OH	
TITLE	VSTD	☒ DELETE
NAME	RAPP, JANET I.	
STREET ADDRESS	129 PARK DRIVE	
CITY-ST-ZIP	XENIA OH	
TITLE	V	☒ DELETE
NAME	RAPP, BRETT A.	
STREET ADDRESS	3712 OLD WICHESTER TRAIL	
CITY-ST-ZIP	XENIA OH	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	RAPP, BRETT A.	
1.3 STREET ADDRESS	3712 OLD WINCHESTER TRAIL	
1.4 CITY-ST-ZIP	XENIA, OH 45385	
2.1 TITLE	VPD	☐ Change ☒ Addition
2.2 NAME	RAPP, DWAYNE A.	
2.3 STREET ADDRESS	2084 DRAKE DRIVE	
2.4 CITY-ST-ZIP	XENIA, OH 45385	
3.1 TITLE	VPD	☐ Change ☒ Addition
3.2 NAME	COLLINS, JEFFREY D.	
3.3 STREET ADDRESS	5819 BURR RD.	
3.4 CITY-ST-ZIP	JAMESTOWN, OH 45335	
4.1 TITLE	SD	☐ Change ☒ Addition
4.2 NAME	RAPP, TOD A.	
4.3 STREET ADDRESS	129 PARK DRIVE	
4.4 CITY-ST-ZIP	XENIA, OH 45385	
5.1 TITLE	TD	☐ Change ☒ Addition
5.2 NAME	RAPP, JANET I.	
5.3 STREET ADDRESS	129 PARK DRIVE	
5.4 CITY-ST-ZIP	XENIA, OH 45385	
6.1 TITLE		☐ Change ☒ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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 *Janet I. Rapp* **JANET I. RAPP** 28 APR 98 (800)

CP2E034 (10/97)