

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519299

FILED
Mar 28, 2007
Secretary of State

Entity Name: INTERGRAPH CORPORATION

Current Principal Place of Business:

10330 USA TODAY WAY
MIRAMAR, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

10330 USA TODAY WAY
MIRAMAR, FL 33025 US

New Mailing Address:

FEI Number: 59-1710951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBER, RICHARD A., C.P.A.
803 SHOLLOW BROOK AVE
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LYON, ANDREA E
Address: 10330 USA TODAY WAY
City-St-Zip: MIRAMAR, FL

Title: PD () Delete
Name: LYON, ROBERT A
Address: 10330 USA TODAY WAY
City-St-Zip: MIRAMAR, FL

Title: CD () Delete
Name: DUFOUR, HARRY A
Address: 10330 USA TODAY WAY
City-St-Zip: MIRAMAR, FL

Title: VPD () Delete
Name: WEAD, DIANE L
Address: 4321 NW 3RD STREET
City-St-Zip: COCONUT CREEK, FL 33066

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LYON, ANDREA E
Address: 10330 USA TODAY WAY
City-St-Zip: MIRAMAR, FL 33025

Title: PD (X) Change () Addition
Name: LYON, ROBERT A
Address: 10330 USA TODAY WAY
City-St-Zip: MIRAMAR, FL 33025

Title: CD (X) Change () Addition
Name: DUFOUR, HARRY A
Address: 10330 USA TODAY WAY
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Change (X) Addition
Name: WEAD, MICHAEL
Address: 4321 NW 3RD STREET
City-St-Zip: COCONUT CREEK, FL 33066 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A. LYON

PD

03/28/2007

Electronic Signature of Signing Officer or Director

Date