

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

55 MAY - 1 PM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 825623

(2)

1. Corporation Name

THE NATIONAL CASH REGISTER COMPANY

Principal Place of Business

C/O NCR CORPORATION, TAXES
1700 S PATTERSON BLVD
DAYTON OH 45479
US

Mailing Address

C/O AT&T GIS, TAXES
1700 S PATTERSON BLVD
DAYTON OH 45479
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/19/1971

3a. Date of Last Report

05/01/1994

4. FEI Number

13-2671021

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

28

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-electing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

HOAK, J. S

STREET ADDRESS

1700 S PATTERSON BLVD

CITY - ST - ZIP

DAYTON OH

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

T

NAME

WINDHOLTZ, T. F

STREET ADDRESS

1700 S PATTERSON BLVD.

CITY - ST - ZIP

DAYTON OH

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

VSD

NAME

NYQUIST, L.K.

STREET ADDRESS

1700 S PATTERSON BLVD.

CITY - ST - ZIP

DAYTON OH

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

D

NAME

JOHNSEN, K. D

STREET ADDRESS

1700 S. PATTERSON BLVD.

CITY - ST - ZIP

DAYTON OH

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

AT

NAME

DONAHUE, J. C

STREET ADDRESS

1700 S PATTERSON BLVD

CITY - ST - ZIP

DAYTON OH

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 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 110.07(3)(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:

Timothy F. Windholtz

Timothy F. Windholtz 4/24/95 513-445-1081

TREASURER

Title

Daytime Phone #