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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 827118

(1)

1. Corporation Name

COMPUTER DATA SYSTEMS, INC.



Principal Place of Business

ONE CURIE COURT
ROCKVILLE MD 20850

Mailing Address

ONE CURIE COURT
ROCKVILLE MD 20850

3. Date Incorporated or Qualified
05/15/1969

3a. Date of Last Report
04/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

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 below. If by new agent, the date of appointment.

Signature typed or printed below. If by new agent, the date of appointment.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE

NAME
KENDALL, CLIFFORD M
STREET ADDRESS
ONE CURIE COURT
CITY-STATE-ZIP
ROCKVILLE MD

2. TITLE ☐ DELETE

NAME
GLENN, GORDON S.
STREET ADDRESS
ONE CURIE COURT
CITY-STATE-ZIP
ROCKVILLE MD

3. TITLE ☐ DELETE

NAME
TINSLEY, WYATT D.
STREET ADDRESS
ONE CURIE COURT
CITY-STATE-ZIP
ROCKVILLE MD

4. TITLE ☐ DELETE

NAME
ZIEGLER, DONALD E.
STREET ADDRESS
ONE CURIE COURT
CITY-STATE-ZIP
ROCKVILLE MD

5. TITLE ☐ DELETE

NAME
GRAY, WILLIAM L.
STREET ADDRESS
ONE CURIE COURT
CITY-STATE-ZIP
ROCKVILLE MD

6. TITLE ☒ DELETE

NAME
HALDEMAN, ROBERT B.
STREET ADDRESS
ONE CURIE COURT
CITY-STATE-ZIP
ROCKVILLE MD

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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:

Donald E. Ziegler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Month/Year

CR2E034 (12/95)