FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **838875** **(3)**

1. Corporation Name

ELECTRONIC DATA SYSTEMS CORPORATION

Principal Place of Business	Mailing Address
5400 LEGACY DR. H1-41-66 PLANO TX 75024 US	5400 LEGACY DR. H1-41-66 PLANO TX 75024 US

3. Date Incorporated or Qualified: **08/03/1977**
3a. Date of Last Report: **02/07/1995**
4. FEI Number: **75-1093604** ☐ 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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES ST.
STE. 105
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 _____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	ALBERTHAL, LESTER M.,JR.		12 NAME		
STREET ADDRESS	5400 LEGACY DR.		13 STREET ADDRESS		
CITY-ST-ZIP	PLANO TX		14 CITY-ST-ZIP		
TITLE	SVP	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	CHIAPPARONE, PAUL J		22 NAME		
STREET ADDRESS	5400 LEGACY DRIVE		23 STREET ADDRESS		
CITY-ST-ZIP	PLANO TX		24 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	LINDERMAN, DEAN		32 NAME		
STREET ADDRESS	5400 LEGACY DR.		33 STREET ADDRESS		
CITY-ST-ZIP	PLANO TX		34 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	CASTLE, JOHN, R		42 NAME		
STREET ADDRESS	5400 LEGACY DR.		43 STREET ADDRESS		
CITY-ST-ZIP	PLANO TX		44 CITY-ST-ZIP		
TITLE	T	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME	BENAC, WILLIAM P		52 NAME		
STREET ADDRESS	5400 LEGACY DR.		53 STREET ADDRESS		
CITY-ST-ZIP	PLANO TX		54 CITY-ST-ZIP		
TITLE	AT	☒ DELETE	61 TITLE	AT	☒ Change ☐ Addition
NAME	RAMSEY, LARRY, L		62 NAME	R. RANDALL CAPPS	
STREET ADDRESS	5400 LEGACY DR		63 STREET ADDRESS	5400 LEGACY DRIVE	
CITY-ST-ZIP	PLANO TX		64 CITY-ST-ZIP	PLANO, TX 75024	

CR2E034 (12/95)

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 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: R. Randall Capps K. RANDALL CAPPS 3/28/96 214-605-1200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #