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 # **844706** (2)

1. Corporation Name
TRIAD SYSTEMS FINANCIAL CORPORATION

Principal Place of Business
3055 TRIAD DRIVE
LIVERMORE CA 94550-9559

Mailing Address
3055 TRIAD DRIVE
LIVERMORE CA 94550-9559

3. Date Incorporated or Qualified: 11/28/1979
3a. Date of Last Report: 08/28/1995
4. FEI Number: 94-2525826 ☐ 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
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
SD	CARLSON, JEROME W	3055 TRIAD DRIVE	LIVERMORE CA	☒ DELETE
D	PORTER, JAMES R	3055 TRIAD DRIVE	LIVERMORE CA	☐ DELETE
P	MARQUIS, STANLEY	3055 TRAID DRIVE	LIVERMORE CA	☐ DELETE
D	GORMAN, SHANE L	3055 TRIAD DR.	LIVERMORE CA	☐ DELETE
AS	MOORE, LEON J	3055 TRIAD DR.	LIVERMORE CA	☐ DELETE
				☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

No.	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
1	SECRETARY	BRUCE M. BLANCO	3055 TRIAD DR	LIVERMORE, CA 94580	☐ Change ☒ Addition
2					☐ Change ☐ Addition
3					☐ Change ☐ Addition
4					☐ Change ☐ Addition
5					☐ Change ☐ Addition
6					☐ Change ☐ Addition

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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)(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: Leon J. Moore
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-96
Date

Daytime Phone #