

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 855618 (5)

1. Corporation Name  
**CDC SERVICES, INC.**



Principal Place of Business: 10700 FRANKSTOWN RD, PITTSBURGH PA 15235  
Mailing Address: 10700 FRANKSTOWN RD, ATTN: TAX DEPT, PITTSBURGH PA 15235

3. Date Incorporated or Qualified: 02/23/1983  
3a. Date of Last Report: 01/25/1995  
4. FEI Number: 25-1229650  
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  
22. Suite, Apt. #, etc.:  
23. City & State:  
24. Zip: 25. Country:  
2a. Mailing Address: 26. 5400 LBJ FREEWAY, Suite, Apt. #, etc.: 27. SUITE 300 TOWER ONE, City & State: 28. DALLAS TX, Zip: 29. 75240, Country: 30. US

9. Name and Address of Current Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC., 1201 HAYS ST., SUITE 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, 85. Zip Code: FL

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	DP	<input checked="" type="checkbox"/> DELETE
NAME	RANGOS, JOHN G. SR.	
STREET ADDRESS	10700 FRANKSTOWN RD.	
CITY-ST-ZIP	PITTSBURGH PA	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	RANGOS, JOHN G. JR.	
STREET ADDRESS	10700 FRANKSTOWN RD.	
CITY-ST-ZIP	PITTSBURGH PA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92		
11 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	WILCOX, CHARLES A.	
13 STREET ADDRESS	5400 LBJ FREEWAY SUITE 300 TOWER ONE	
14 CITY-ST-ZIP	DALLAS TX 75240	
21 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	SANGALIS, GREGORY T.	
23 STREET ADDRESS	5400 LBJ FREEWAY SUITE 300 TOWER ONE	
24 CITY-ST-ZIP	DALLAS TX 75240	
31 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	DEFRATES, EARLE E.	
33 STREET ADDRESS	5400 LBJ FREEWAY SUITE 300 TOWER ONE	
34 CITY-ST-ZIP	DALLAS TX 75240	
41 TITLE	Y	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	BRUER, E. GWYDOK	
43 STREET ADDRESS	5400 LBJ FREEWAY, SUITE 300, TOWER ONE	
44 CITY-ST-ZIP	DALLAS, TX 75240	
51 TITLE	ASST SEBY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	BRYAN J BLANKFIELD	
53 STREET ADDRESS	5400 LBJ FREEWAY, SUITE 300, TOWER ONE	
54 CITY-ST-ZIP	DALLAS, TX 75240	
61 TITLE	ASST SEBY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	KAY F. STORKER	
63 STREET ADDRESS	5400 LBJ FREEWAY, SUITE 300, TOWER ONE	
64 CITY-ST-ZIP	DALLAS, TX 75240	

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 filing 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 registered agent 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, unchanged, or on an attachment with an address

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND VERIFIED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/30/96 214/383/9541  
DATE PREPARED

CR2E034 (12/95)