

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 24, 2004 8:00 am**  
**Secretary of State**

02-24-2004 90003 038 \*\*\*150.00

**DOCUMENT # F00000001945**

1. Entity Name

ADC SOFTWARE SYSTEMS USA, INC.



Principal Place of Business

P.O. BOX 1101 (MSO42)  
MINNEAPOLIS MN 55440-1101

Mailing Address

P.O. BOX 1101 (MSO42)  
MINNEAPOLIS MN 55440-1101

2. Principal Place of Business

Suite, Apt. #, etc.  
13625 Technology Dr.

City & State  
Eden Prairie, MN

Zip  
55344

Country  
Hennepin

3. Mailing Address

Suite, Apt. #, etc.  
13625 Technology Drive

City & State  
Eden Prairie, MN

Zip  
55344

Country  
Hennepin

44012463



MOORE

CR2E034 (11/03)

4. FEI Number  
54-1578091

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME BARKER, LAWRENCE S  
STREET ADDRESS ONE VAN DE GRAAFF DRIVE  
CITY-ST-ZIP BURLINGTON MA 01803

TITLE VPD ☐ Delete  
NAME CRARY, BRADLEY V  
STREET ADDRESS 13625 TECHNOLOGY DR  
CITY-ST-ZIP EDEN PRAIRIE MN 55344

TITLE VPSD ☐ Delete  
NAME PFLAUM, JEFFREY-D  
STREET ADDRESS 13625 TECHNOLOGY DRIVE  
CITY-ST-ZIP EDEN PRAIRIE MN 55344

TITLE VPTD ☐ Delete  
NAME HEMMADY, GOKUL  
STREET ADDRESS 13625 TECHNOLOGY DRIVE  
CITY-ST-ZIP EDEN PRAIRIE MN 55344

TITLE AS ☐ Delete  
NAME DONLIN, DAVID L  
STREET ADDRESS 13625 TECHNOLOGY DRIVE  
CITY-ST-ZIP EDEN PRAIRIE MN 55344

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME Jo Anne M. Anderson  
STREET ADDRESS 13625 Technology Dr.  
CITY-ST-ZIP Eden Prairie, MN 55344

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Vice President, Treasurer ☒ Change ☐ Addition  
NAME Mark P. Borman  
STREET ADDRESS 13625 Technology Drive  
CITY-ST-ZIP Eden Prairie, MN 55344

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David L. Donlin* David L. Donlin

2/10/04

952-917-0227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #