

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90023 013 ***150.00

05/16/02 AI

DOCUMENT # F00000002952

1. Entity Name
AVANADE INC.

Principal Place of Business

**2211 ELLIOTT AVE
 SEATTLE WA 98121**

Mailing Address

**2211 ELLIOTT AVE
 SEATTLE WA 98121**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

91-2032865

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **DP**
 STREET ADDRESS **HILL, MITCHELL C**
 CITY-ST-ZIP **2211 ELLIOTT AVE
 SEATTLE WA 98121**

TITLE ☐ Change ☒ Addition
 NAME **T**
 STREET ADDRESS **SUTTEN, DOUGLAS C.**
 CITY-ST-ZIP **2211 ELLIOTT AVE
 SEATTLE, WA 98121**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **WILSON, JACKSON L**
 CITY-ST-ZIP **1661 PAGE MILL ROAD
 PALO ALTO CA 94304**

TITLE ☒ Change ☐ Addition
 NAME **C**
 STREET ADDRESS **WILSON, JACKSON L**
 CITY-ST-ZIP **1661 PAGE MILL ROAD
 PALO ALTO, CA 94304**

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **SHUI, JOYCE**
 CITY-ST-ZIP **2211 ELLIOTT AVE
 SEATTLE WA 98121**

TITLE ☐ Change ☒ Addition
 NAME **CFO**
 STREET ADDRESS **KNAPP, DENNIS**
 CITY-ST-ZIP **2211 ELLIOTT AVE
 SEATTLE, WA 98121**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **MARITZ, PAUL**
 CITY-ST-ZIP **ONE MICROSOFT WAY
 REDMOND WA 98052-6399**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **CONNORS, JOHN**
 CITY-ST-ZIP **ONE MICROSOFT WAY
 REDMOND, WA 98052**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **COMERFORD, JOELLIN**
 CITY-ST-ZIP **1345 AVENUE OF THE AMERICAS 6TH FLOOR
 NEW YORK NY 10105**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **MILNER, DAVID**
 CITY-ST-ZIP **60 QUEEN VICTORIA STREET
 LONDON, EC4N 4TW**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **HILL, DAVID L**
 CITY-ST-ZIP **3773 WILLOW ROAD
 NORTHBROOK IL 60062**

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **JURY, TIMOTHY G**
 CITY-ST-ZIP **7500 COLLEGE BLVD, SUITE 1400
 OVERLAND PARK, KS 66210**

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DOUGLAS C. SUTTEN

4/24/02

Date

(206) 239-5885

Daytime Phone #

CR2E034 (9/01)