2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 13, 2004 8:00 am Secretary of State DOCUMENT # F01000006518 04-13-2004 90028 018 ***150.00 1. Entity Name SYSTEAM OF ALABAMA, INC. Principal Place of Business Mailing Address J4UJIJJJ 1804 HWY 231 SOUT 1804 HWY 231 SOUT LACEYS SPRING, AL 35754 LACEYS SPRING, AL 35754 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 64-0664197 Not Applicable Zib Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 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 Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE PCD TITLE Change □ Delete V/T/S/D TAYLOR, JAMES S NAME NAME SHANNON, KEVIN J. STREET ADDRESS 1804 HWY 231 S. STREET ADDRESS 1804 HIGHWAY 231 S. CITY-ST-ZIP LACEYS SPRING, AL 35754 CITY-ST-ZIP LACEY'S SPRING, AL 35754 Change X Delete TITLE TITLE Addition SHANNON, KEVIN J NAME NAME HORVATH, LEROY 1804 HWY 231 S. STREET ADDRESS STREET ADDRESS 281 ANDÉS DRIVE CITY-ST-ZIP LACEYS SPRING, AL 35754 CITY-ST-ZIP GLEN CARBON, IL 62034 TITLE TITLE Delete ☐ Change Addition NAME BARTON, STEPHEN P NAME STREET ADDRESS 1804 HWY 231 S. STREET ADDRESS LACEYS SPRING, AL 35754 CITY-ST-ZIP CITY-ST-7IP X Delete TITLE TITLE ☐ Change Addition SANDERFORD, HOWARD NAME NAME STREET ADDRESS 1804 HWY 231 S. STREET ADDRESS CITY-ST-ZIP LACEYS SPRING, AL 35754 CITY-ST-7iP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME

FILED

12. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:	Kerin & Shannon	4/1/04	(256) 650-2500
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #