

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91167 006 \*\*\*150.00

0669490 AB

**DOCUMENT # F02000000037**

1. Entity Name  
**SYMITAR SYSTEMS, INC.**



Principal Place of Business  
**404 CAMINO DEL RIO SOUTH  
STE 200  
SAN DIEGO CA 65708**

Mailing Address  
**PO BOX 807  
MONETT MO 65708**



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

CHECK HERE IF MAKING CHANGES

4. FEI Number **33-0039345**

Applied For  
 Not Applicable

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 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	<input type="checkbox"/> Delete
NAME	<b>CORMODE, BRUCE</b>	
STREET ADDRESS	<b>404 CAMINO DEL RIO SOUTH STE 200</b>	
CITY-ST-ZIP	<b>SAN DIEGO CA</b>	
TITLE	V	<input type="checkbox"/> Delete
NAME	<b>HENRY, MICHAEL E</b>	
STREET ADDRESS	<b>663 WEST HWY</b>	
CITY-ST-ZIP	<b>MONETT MO</b>	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	<b>THOMPSON, TERRY W</b>	
STREET ADDRESS	<b>663 WEST HWY</b>	
CITY-ST-ZIP	<b>MONETT MO</b>	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	<b>WILLIAMS, KEVIN D</b>	
STREET ADDRESS	<b>663 WEST HWY</b>	
CITY-ST-ZIP	<b>MONETT MO</b>	
TITLE	S	<input type="checkbox"/> Delete
NAME	<b>GRAY, JANET E</b>	
STREET ADDRESS	<b>663 WEST HWY</b>	
CITY-ST-ZIP	<b>MONETT MO</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	<b>PLEASE SEE ATTACHED SCHEDULE</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	<b>FOR CHANGES</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:** *Kevin D Williams* **REQUIRED** TREASURER 1/7/03 417-235-6652  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR20034 (1/0/02)

ATTN: M. U. W.

F020 06000037  
40019146  
Symitar Systems, Inc.  
Officer List

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Bruce H. Cornode	President	404 Camino del Rio South, Suite 200 San Diego, CA 92108
Michael E. Henry	Vice-President	663 West Highway 60 Monett, MO 65708
John F. Prim	Vice-President	4135 S. Stream Blvd., Suite 300 Charlotte, NC 28217
Tony L. Worrington	Vice-President	663 W. Hwy 60, P.O. Box 807 Monett, MO 65708
Kevin D. Williams	Treasurer	663 West Highway 60 Monett, MO 65708
Janet E. Gray	Secretary	663 West Highway 60 Monett, MO 65708