

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001948

FILED
Jan 13, 2004
Secretary of State

Entity Name: REALVUE SIMULATION TECHNOLOGIES, INC.

Current Principal Place of Business:

8601 FM 2222 BLDG 3
S#410
AUSTIN, TX 78730

New Principal Place of Business:

Current Mailing Address:

8601 FM 2222 BLDG 3
S#410
AUSTIN, TX 78730

New Mailing Address:

FEI Number: 26-0024917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ELLETT, PHILIP D
Address: 8601 FM2222 BLDG 3 SUITE 410
City-St-Zip: AUSTIN, TX 78730

Title: D () Delete
Name: FERNANDEZ, MANNY
Address: 8601 FM2222 BLDG 3 SUITE 410
City-St-Zip: AUSTIN, TX 78730

Title: D () Delete
Name: ESKANAZI, STEVE
Address: 8601 FM2222 BLDG 3 SUITE 410
City-St-Zip: AUSTIN, TX 78730

Title: D () Delete
Name: BUFFA, MICHAEL
Address: 8601 FM2222 BLDG 3 SUITE 410
City-St-Zip: AUSTIN, TX 78730

Title: S () Delete
Name: TURNER, DONALD
Address: 8601 FM2222 BLDG 3 SUITE 410
City-St-Zip: AUSTIN, TX 78730

Title: D (X) Delete
Name: ROTTENBERG, JASON
Address: 485 NORTH KELLER ROAD, SUITE 100
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TURNER, DONALD CFO
Address: 8601 FM2222 BLDG 3 SUITE 410
City-St-Zip: AUSTIN, TX 78730

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD R. TURNER

S

01/13/2004

Electronic Signature of Signing Officer or Director

Date