2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State **DOCUMENT # F50372** 1. Entity Name H.T.E., INC. 04-25-2001 90159 043 ***150.00 Principal Place of Business Mailing Address 1000 BUSINESS CENTER DRIVE 1000 BUSINESS CENTER DRIVE LAKE MARY FL 32746 LAKE MARY FL 32746 **^/CU/CUU** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2133858 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GORNTO, L.A. JR., GORNTO., L.A., ESQ. Street Address (P.O. Box Number is Not Acceptable) 149F SOUTH RIDGEWOOD AVENUE DAYTONA BEACH FL 32114 City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Change X Addition TITLE CD ☐ Delete TITLE £Υ GOODROW, RONALD E. 843 GOLF VALLEY DR. NAME NAME MARKEY, BERNARD B STREET ADDRESS STREET ADDRESS 259 RADNOR CHESTER RD RPOPKA, FL. 327/2 CITY-ST-ZIP CITY-ST-ZIP RADNOR PA 19287 ☐ Change **X** Addition **PCED** ☐ Delete TIT! F TITLE VICKERS, TAMES T. 3100 DOE HILL COURT NAME LOUGHRY, JOSEPH M III NAME STREET ADDRESS STREET ADDRESS 3220 OAKMONT TERR CITY-ST-ZIP CITY-ST-7IP RALEIGH, NC 27612 LONGWOOD FL 32779 YCFTAS TITLE **X** Change ☐ Addition ☐ Delete TITLE VTCS FALOTICO, SUSAN D NAME NAME 1724 FOUNTAINHEAD DR LAKE MARY, FL. 32746 STREET ADDRESS STREET ADDRESS 2241 HEATHER OAK DR CITY-ST-ZIP CITY-ST-ZIP APOPKA FL Change Addition ☑ Delete TITLE TITLE BARNETT, WILLIAM C. NAME NAME HEAFY, BRIAN B STREET ADDRESS **404 NEW WATERFORD PLACE** STREET ADDRESS 1043 SHINNECOCK HILL CITY-ST-ZIP CITY-ST-ZIP DVEIDO, FL. 32765 LONGWOOD FL 32779 **X** Addition ☐ Delete TITLE ☐ Change SANTOS, GILBERT D RAMOS, D.F. NAME 14020 CARLTON DR STREET ADDRESS STREET ADDRESS 141 W READING WAY DAULE, FL. 33330 EYSAT G D CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32789 Change **EVSG** ☐ Delete TITLE ☐ Addition NAME GORNTO, L.A. JR. NAME

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 all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

149-F S. RIDGEWOOD AVE.

DAYTONA BEACH FL 32114

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2001 UNIFORM BUSINESS REPORT (UBR)

Attachment AUS7057

DOCUMENT # F50372

1. Entity Name
H.T.E., INC.

Principal Place of Business

Mailing Address

1000 BUSINESS CENTER DRIVE
LAKE MARY FL 32746

Mailing Address

LAKE MARY FL 32746

CONTINUED

11.	OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	ITILE D Change DA NAME LEINARD, MARK H. STREET ADDRESS 51 51 51 7 7 7 8	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZHP	☐ Delete	CITY-ST-ZIP TORONTO, CAN, DNT M4E 2R2 TITLE NAME NOSES, EDWARD A., PHD STREET ADDRESS CITY-ST-ZIP HEATHROW, FL. 32746	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE Change AND AND CHANGE STREET ADDRESS CITY-ST-ZIP	ddition .
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE Change AC NAME STREET ADDRESS CITY-ST-ZIP	ddition
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