2002 UNIFORM BUSINESS REPORT (UBR)

May 01, 2002 8:00 am Secretary of State DOCUMENT # F93000002269 1. Entity Name FRONTSTEP SOLUTIONS GROUP, INC. 05-01-2002 91617 030 ***150.00 Principal Place of Business Mailing Address 2800 CORPORATE EXCHANGE DR., 2900 CORPORATE EXCHANGE DR., COLUMBUS OH 43231 COLUMBUS OH 43231 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 31-1286706 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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 it applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 🖫 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete D TITLE ☐ Change **X** Addition NAME FOX. LAWRENCE J NAME STREET ADDRESS 2800 CORPORATE EXCHANGE DR., SUITE 400 STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43231 CITY-ST-ZIP D,P CE₀ ☐ Delete TITLE ☐ Change **Addition** NAME SASSER, STEPHEN A NAME STREET ADDRESS 2800 CORPORATE EXCHANGE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH TITLE ☐ Delete TITLE ☐ Addition NAME DELEON, LARRY NAME STREET ADDRESS STREET ADDRESS 2800 CORPORATE EXCHANGE DRIVE CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH TITLE ☐ Delete · **VSCF** TITLE ☐ Change ☐ Addition NAME NAME BUETTIN, DANIEL P STREET ADDRESS STREET ADDRESS 2800 CORPORATE EXCHANGE DRIVE CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH 43231 TITLE X Delete AS TITLE Change ☐ Addition NAME SHAPIRO, RICK NAME STREET ADDRESS STREET ADDRESS 2800 CORPORATE EXCHANGE DRIVE CITY-ST-7IP CITY-ST-ZIP COLUMBUS OH 43231 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 ampowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: (

changed, or on an atta

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED