

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 15 AM 9:21

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # F93000002388

1. Corporation Name

Performance Systems International, Inc

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

10/21/88

4. FBI Number

Applied For

Not Applicable

16-1353600

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Herndon, Virginia

26 510 Huntmar Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23

28 Herndon, VA

24 Zip

Country

29 Zip

Country

25

20070

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when translating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President/CEO
NAME William Schrader
STREET ADDRESS 510 Huntmar Park Dr
CITY ST ZIP Herndon, VA 22070

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

☐ Change ☐ Addition
200001489592
-05/17/95--01005--018
****233.75 ****233.75

TITLE Vice President
NAME Martin Schreffstall
STREET ADDRESS 510 Huntmar Park Dr
CITY ST ZIP Herndon, VA 22070

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

☐ Change ☐ Addition

TITLE Secretary
NAME Daniel Cunningham
STREET ADDRESS 510 Huntmar Park Dr
CITY ST ZIP Herndon, VA 22070

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

☐ Change ☐ Addition

TITLE Director
NAME William Baumes
STREET ADDRESS 4545 Christian Drive
CITY ST ZIP Clarence, NY 14031

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

☐ Change ☐ Addition

TITLE Director
NAME Michael Humphreys
STREET ADDRESS One Int'l Place, Suite 3250
CITY ST ZIP Boston, MA 02110

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

☐ Change ☐ Addition

TITLE Director
NAME Wade Woodson
STREET ADDRESS 2884 Sand Hill Road #121
CITY ST ZIP Menlo Park, CA 94025

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

DANIEL P. CUNNINGHAM, VP/Manager

(Note: Signature and typed or printed name of signing officer or director)

(Note: Signature and typed or printed name of signing officer or director)