

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F93000004260 (6)

1. Corporation Name

CSC GEOGRAPHIC TECHNOLOGIES INC.



Principal Place of Business

2100 E. GRAND AVENUE  
EL SEGUNDO CA 90245

Mailing Address

2100 E. GRAND AVENUE  
EL SEGUNDO CA 90245

3. Date Incorporated or Qualified

09/20/1993

3a. Date of Last Report

04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

52-1794717

Applied For

Not Applicable

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. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE  
NAME MEYERSON, GEORGE O  
STREET ADDRESS 4061 POWDER MILL ROAD  
CITY-STATE-ZIP CALVERTON MD 20705

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

TITLE VTD ☐ DELETE  
NAME LEVEL, LEON J  
STREET ADDRESS 2100 EAST GRAND AVENUE  
CITY-STATE-ZIP EL SEGUNDO CA 90245

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

TITLE VSD ☐ DELETE  
NAME FISK, HAWARD D  
STREET ADDRESS 2100 EAST GRAND AVENUE  
CITY-STATE-ZIP EL SEGUNDO CA 90245

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

TITLE VATD ☐ DELETE  
NAME MCVAY, JAMES M  
STREET ADDRESS 4061 POWDER MILL ROAD  
CITY-STATE-ZIP CALVERTON MD 20705

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

TITLE AT ☐ DELETE  
NAME GOODMAN, LARRY D  
STREET ADDRESS 2100 E. GRAND AVENUE  
CITY-STATE-ZIP EL SEGUNDO CA 90245

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

TITLE AT ☐ DELETE  
NAME IRVIN, THOMAS R  
STREET ADDRESS 2100 E. GRAND AVENUE  
CITY-STATE-ZIP EL SEGUNDO CA 90245

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

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:

Leon J. Level

1/31/96

(310) 615-0311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)