

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90415 043 ***550.00

0606335 AT

DOCUMENT # F94000001176
 1. Entity Name
RESOURCE INFORMATION MANAGEMENT SYSTEMS, INC.

Principal Place of Business Mailing Address
500 TECHNOLOGY DRIVE 500 TECHNOLOGY DRIVE
P.O. BOX 3094 P.O. BOX 3094
NAPERVILLE IL 60566-7094 NAPERVILLE IL 60566-7094



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **36-3170672** Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS **MARGOLIS, JEFFREY H**
 CITY-ST-ZIP **567 SAN NICOLAS DRIVE**
NEWPORT BEACH CA 92660

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **Please see attached Addendum 1**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **SD**
 STREET ADDRESS **SUNDERLAND, MICHAEL J**
 CITY-ST-ZIP **567 SAN NICOLAS DRIVE**
NEWPORT BEACH CA 92660

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **KARR, D. BRIAN**
 CITY-ST-ZIP **567 SAN NICOLAS DRIVE**
NEWPORT BEACH CA 92660

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **AS**
 STREET ADDRESS **MILLER, CHRISTINA A**
 CITY-ST-ZIP **567 SAN NICOLAS DRIVE**
NEWPORT BEACH CA 92660

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 an address, with all other like empowered.

SIGNATURE: **SUNDERLAND**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/02 (949) 719-2200
 Date Daytime Phone #

CR2E034 (9/01)

Attachment
F94000001176

Addendum 1

**Attachment to
2002 Uniform Business Report
Florida Division of Corporations**

Corporation Name: Resource Information Management Systems, Inc.

Item 12. Additions/Changes to Officers and Directors.

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Jeffrey H. Margolis	President, Chief Executive Officer, and Chairman; Director	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660
Michael J. Sunderland	Chief Financial Officer and Secretary; Director	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660
D. Brian Karr	Treasurer	6061 S .Willow Drive Greenwood Village, CO 80111