

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000001901

1. Entity Name

VIASOFT, INC.

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90011 026 ***558.75

Principal Place of Business

Mailing Address

3033 N. 44TH ST.
PHOENIX AZ 85018

3033 N. 44TH ST.
PHOENIX AZ 85018-7226

2. Principal Place of Business

3. Mailing Address

4343 E. CAMELBACK

4343 E. CAMELBACK

Suite, Apt. #, etc.

Suite, Apt. #, etc.

350

350

City & State

City & State

PHOENIX, AZ

PHOENIX, AZ

Zip

Country

Zip

Country

85018

USA

85018

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

94-2892506

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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, 2000 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 D ☒ Delete
NAME PATTERSON, ARTHUR
STREET ADDRESS 3033 N. 44TH ST.
CITY-ST-ZIP PHOENIX AZ

TITLE ☒ Change ☒ Addition
NAME ARTHUR L. ALLEN
STREET ADDRESS 4343 E. CAMELBACK RD # 350
CITY-ST-ZIP PHOENIX, AZ 85018

TITLE CPD ☒ Delete
NAME WHITEMAN, STEVEN D
STREET ADDRESS 3033 N. 44TH ST.
CITY-ST-ZIP PHOENIX AZ

TITLE ☒ Change ☒ Addition
NAME KRISTINE KENNEDY RIEGER
STREET ADDRESS 4343 E CAMELBACK RD #350
CITY-ST-ZIP PHOENIX, AZ 85018

TITLE V ☒ Delete
NAME REARDON, COLIN
STREET ADDRESS 3033 N. 44TH ST.
CITY-ST-ZIP PHOENIX AZ 85018

TITLE ☒ Change ☒ Addition
NAME PATRICK L. PULLEN
STREET ADDRESS 4343 E CAMELBACK RD #350
CITY-ST-ZIP PHOENIX, AZ 85018

TITLE VS ☒ Delete
NAME HARDWICK, CATHERINE
STREET ADDRESS 3033 N. 44TH ST.
CITY-ST-ZIP PHOENIX AZ 85018

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

TITLE CFO ☒ Delete
NAME SCHONAU, MARK R.
STREET ADDRESS 3033 N 44TH ST
CITY-ST-ZIP PHOENIX AZ

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

TITLE D ☒ Delete
NAME KULI, ALEXANDER
STREET ADDRESS 3033 N. 44TH ST.
CITY-ST-ZIP PHOENIX AZ 85018

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-00

Date

Daytime Phone #

CF2 1-4 (1/99)