

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

1-3

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000001546 (9)

1. Corporation Name

KNOWLEDGEWARE, INC.



Principal Place of Business

1209 ORANGE ST.
WILMINGTON DE 19801

Mailing Address

1209 ORANGE ST.
WILMINGTON DE 19801

3. Date Incorporated or Qualified

03/30/1995

3a. Date of Last Report

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

4. FEI Number

APPLIED FOR

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

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

10. Name and Address of New Registered Agent

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 fee, if applicable

(Typed or Printed Agent Signature required when "Changing")

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME FERRUCCI, MARK A
STREET ADDRESS 1209 ORANGE ST.
CITY-ST-ZIP WILMINGTON DE 19801

TITLE VTAS ☐ DELETE
NAME HORNE, ADRIANNE M
STREET ADDRESS 1209 ORANGE ST.
CITY-ST-ZIP WILMINGTON DE 19801

TITLE VSAT ☐ DELETE
NAME LUTTHANS, KIM E
STREET ADDRESS 1209 ORANGE ST.
CITY-ST-ZIP WILMINGTON DE 19801

TITLE VAS ☐ DELETE
NAME DENNY, CAMILIA N
STREET ADDRESS 1209 ORANGE ST.
CITY-ST-ZIP WILMINGTON DE 19801

TITLE VAS ☐ DELETE
NAME WILLIAMS, MARVA L
STREET ADDRESS 1209 ORANGE ST.
CITY-ST-ZIP WILMINGTON DE 19801

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

900001786449
-04/19/96--01007--012
***200.00

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:

M.A. FERRUCCI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/96

302658-7581

CR2E034 (12/95)

KNOWLEDGEWARE, INC.
CORPORATION TRUST CENTER
1209 Orange Street
Wilmington, Delaware 19801

April 10, 1996

DIVISION OF CORPORATIONS
ANNUAL REPORTS SECTION
P. O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

Gentlemen:

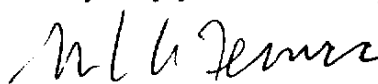
We enclose for filing the following return of this corporation, for the year ended 1996.

ANNUAL REPORT

☒ Also enclosed is a check in the amount of \$ 200.00 covering payment due.

Please acknowledge receipt by stamping and returning to us the enclosed copy of this letter.

Very truly yours,



MARK A. FERRUCCI
President

MAF:sua
Enclosures

KNOWLEDGEWARE, INC.
CORPORATION TRUST CENTER
1209 Orange Street
Wilmington, Delaware 19801

April 10, 1996

DIVISION OF CORPORATIONS
ANNUAL REPORTS SECTION
P. O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

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