"FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000004990 (6)

SEER TECHNOLOGIES, INC.

FILED May 04 1998 8:00am Secretary of State

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							_		MIN)	
Principal Place of Business Mailing Address					r tadtrat trid taiet attit gatti getit getit getit getit getit einis fatt fatt fatt						
8000 REGENCY PARKWAY ATTN: DENNIS MCKINNIE CARY NC 27511 US			ATTN: DENNI	8000 REGENCY PARKWAY Attn: Dennis McKinnie Cary NC 27511 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/13/1995				
2. Principal Place of Business			2a. Mailing Ad	2a. Mailing Address				Number		Applied For	
21			26	26				13-3556562		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt	Suite, Apt. #, etc.				5. Certificate of Status Desired			
23	City & State		City & Sta	City & State				ction Campaign Financing st Fund Contribution	~ ~		
24	Zip	Country 25	Zip [29]	30 Co	untry			s corporation owes or has paid the currersonal Properly Tax due June 30.	ent yea] Yes	r Intangible No	
1201 HAYS STREET SUITE 105						10. Name and Address of New Registered Agent					
						Name Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301					83	I					

11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, 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, it am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.

City

•	The terminal with, talks accomplished the trongenting of, Occident correction					
SIGNATURE	Signature Typed or printed name of registered agent and title if applicable	(NOTE Re	onitangia Ingga Yesislang	required when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	
TITLE	VT DEL	FTE	1.1 TITLE	P	Change	Addition
NAME	D MISZEWICKI, STEVEN		1.2 NAME	Thomas A. Wilson		
STREET ADDRESS	8000 REGENCY PARKWAY	- 1	1.3 STREET ADDRESS	8000 Regency Parkway		
CITY-ST-ZIP	CARY NC	ı	1.4 CITY - ST - ZIP	cary NC		,
TITLE	DEL	.ETE	2.1 TITLE	S	Change	Addition
NAME			2.2 NAME	Dennis Mckinnic		•
STREET ADDRESS		1	2.3 STREET ADDRESS	8000 Regency Parkway		
CITY-ST-ZIP		1	2, 4 CITY - ST - ZIP	Cary NC J		
TITLE	DEL	.ETE	3.1 TITLE	V J	Change	Addition
NAME	•	1	3.2 NAME	Ted Venema		•
STREET ADDRESS			3,3 STREET ADDRESS	8000 Regerky Parkway	1	
CITY-ST-ZIP		1	3.4. CITY - ST - ZiP	Cary No -		
TITLE	□ DEL	.ETE	4.1 TITLE		Change	☐ Addition
NAME		1	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	DEL	.ETE	51 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY- ST-ZIP			
TITLE	□ DEL	FTE	6 1 10 LE		Change	Addition
NAME		1	6.2 NAME			
STREET ADDRESS		Ī	6.3 STREET ADDRESS			
CITY OT TID		1	EACITY, CT. 7ID			

14. Thereby 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 annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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 attraction of the corporation of the receiver or trusted 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 attraction of the corporation of the receiver or trusted 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 attraction of the corporation of the receiver or trusted 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 attraction of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes.

Dennis McKinnie

010.20A.6000

Zip Code