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Feb 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000005871 (7)

1. Corporation Name
SUCCESSWARE, INC. OF MISSOURI



Principal Place of Business

11330-5 ST. JOHN'S IND. PKWY.
JACKSONVILLE FL 32246

Mailing Address

11330-5 ST. JOHN'S IND. PKWY.
JACKSONVILLE FL 32246-6673

3. Date Incorporated or Qualified

12/04/1995

3a. Date of Last Report

02/27/1996

4. FEI Number

43-1661275

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CARVER, TERRI
11330 ST. JOHN'S PARKWAY
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name

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

11330-5 St. Johns Industrial Pkwy.

83

84 City

FL

85

Zip Code
32246

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

Terri Carver

TERRI CARVER

2/10/97

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D YOUNG, JOHN ☒ DELETE
NAME 13950 SWITZER
STREET ADDRESS OVERLAND PARK KS 66221
CITY-ST-ZIP

TITLE D FRANCK, PETER ☒ DELETE
NAME 4908 COSHATT DR.
STREET ADDRESS BIRMINGHAM AL 35244
CITY-ST-ZIP

TITLE C OSGOOD, DICK ☒ DELETE
NAME 11330-5 ST. JOHN'S PKWY.
STREET ADDRESS JACKSONVILLE FL 32246
CITY-ST-ZIP

TITLE V STOJEB, DEB ☐ DELETE
NAME 330 SOUTH MAPLE AVE.
STREET ADDRESS WEBSTER GROVES MO 63119
CITY-ST-ZIP

TITLE S POWELL, ROY ☐ DELETE
NAME 14136 IVYGAIL DRIVE NORTH
STREET ADDRESS JACKSONVILLE FL 32225
CITY-ST-ZIP

TITLE P DIR'E, PHIL ☐ DELETE
NAME 5155 CLEARVIEW DR.
STREET ADDRESS BUFFALO NY 14221
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE C ☐ Change ☒ Addition
1.2 NAME HANDWICK, Fred
1.3 STREET ADDRESS 5 Arrow Ridge Ct.
1.4 CITY-ST-ZIP Little Rock, AR 72205

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME DIR'E, Vince
2.3 STREET ADDRESS 36 THAMESFORD LN.
2.4 CITY-ST-ZIP Buffalo, NY 14221-5964

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME SHWARTZ, Kelly
3.3 STREET ADDRESS 222 N. DRAPER LN.
3.4 CITY-ST-ZIP Provo, UT 84603

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

14. I do 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 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: *Roy W. Powell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97 904/646-5666
Date Daytime Phone

CR2E034 (9/96)