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2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 20, 2000 8:00 am Secretary of State DOCUMENT # F9600001705 1. Entity Name **ELECTRONIC DATA SYSTEMS CORPORATION** 03-20-2000 90131 041 ***150.00 Mailing Address Principal Place of Business 5400 LEGACY DR 5400 LEGACY DRIVE PLANO TX 75024 HI-4A-66 PLANO TX 75024-3105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 75-2548221 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City Zip Code FŁ 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS Addition TITLE ☐ Delete TITLE Change BROWN, RICHARD H NAME NAME STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE CITY-ST-ZIP CITY-ST-ZIP PLANO TX 75024 Change ☐ Addition ☐ Delete TITLE TITLE CHIAPPARONE. PAUL J. CASTLE, JOHN R JR. NAME 5400 LEGACY DR STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE PLANO TX 75024 CITY-ST-7IP CITY-ST-ZIP PLANO TX ☐ Delete ☐ Change ☐ Addition TITLE TITLE HELLER, JEFFREY M NAME NAME STREET ADDRESS 5400 LEGACY DRIVE STREET ADDRESS CITY-ST-7IE CITY-ST-ZIP PLANO TX ☐ Change ☐ Addition ☐ Delete TITLE TITLE DALEY, JAMES E NAME NAME STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE CITY-ST-ZIP CITY-ST-ZIP PLANO TX 5V Addition TITLE ☐ Delete TITLE NAME FRIEDLANDER, D. GILBERT NAME STREET ADDRESS STREET ADDRESS 5400 LEGACY DRIVE CITY-ST-ZIP CITY-ST-ZIP PLANO TX Change Addition ☐ Delete TITLE TITLE BARTON, BARBARA NAME STREET ADDRESS 5400 LEGECY DR STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP PLANO TX 13. 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 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, will all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR BRINTED NAME OF SIGNING PEFICER OR DIRECTOR

3-14-00 972-605-1200

Daytime Phone is