## **2003 FOR PROFIT CORPORATION**

F96000001705

## **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 1. Entity Name

ELECTRONIC DATA SYSTEMS CORPORATION



**FILED** May 02, 2003 8:00 am Secretary of State

05-02-2003 90726 027 \*\*\*150.00

						- 000 N	<u> </u>	l				
Principal Plac 5400 LEGACY PLANO TX 750		Mailing Address 5400 LEGACY DR HI-4A-66 PLANO TX 75024-3105 US										
2. Principal P	Place of Busine	3. Mailing Address					]		il serii fetii et	<b>                                    </b>	10101 DIIL 1601	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & Stat	te	City & State					<b>4</b> . FE	75-2548221			pplied For ot Applicable	
Zip Country			Zip Count			y 5. Certificate of Stat		ertificate of Status Desired		8.75 Ad ee Require		
	6. Name a	Registered Agent				7. Name and Address of New Registered Agent						
6. Name and Address of Current Registered Agent						Name			<del></del>		<u> </u>	
THE PRENTICE-HALL CORPORATION SYSTEM				I, INC.			ddress (f	dress (P.O. Box Number is Not Acceptable)				
1201 HAYS STREET				Sileet Address				F.O. BO		·· <i>)</i>	_ <del>_</del>	
SUITE 105									•			
TALLAHAS	SSEE FL 3230	01	_	_			ity			FL	Zip Cod	le
	named entity a tions of register		the purpo	ose of changing its	registere	d office o	r registere	ed ager	nt, or both, in the State of Flo	orida. I am fa	miliar with,	and accept
SIGNATURE												
						<del></del>		· T				
		FEE IS \$150.00							9. Election Campaign Fin	ancing	\$5.0	00 May Be
		Fee will be \$550.00 Florida Department of	State					ļ	Trust Fund Contribution	n. 🗀		d to Fees
10.	11.				DITIONS/CHANGES TO OFF	ICEDS AND	NIDECTOR	IC IN 11				
TITLE	CD	OFFICERS AND I	DINECTOR	√S Delete	TITLE		CD				Change	Addition
NAME	BROWN, RK	CHARD H		Delete	NAME		Jord	an, 1	Michael H.		Onange	Acadion
STREET ADDRESS	5400 LEGAC	CY DRIVE			STREE	T ADDRESS	5400	, Les	acy Dr.			
CITY-ST-ZIP	PLANO TX 7	75024			CITY-	ST-ZIP	Plan	10, -	Tx 75024			1
TITLE	V			Delete	TITLE		V		Towas F		☐ Change	Addition
NAME	CHIAPPARO			•	NAME		Date	- راک <sup>د</sup> معاد	James E yacy Dr.			}
	5400 LEGAC					T ADDRESS	3400	- 0	Tx 75024	-		
CITY-ST-ZIP	PLANO TX 7	/5024			+	ST-ZIP	<u> </u>	10.				
TITLE	b	CCDCV 14		☐ Delete	TITLE		PD			,	<b>⊠</b> Change	☐ Addition
NAME STREET ADDRESS	HELLER, JEI   5400 LEGAC				NAME	T ADDRESS						Ì
	PLANO TX	OI DUIAC				ST-ZIP	ł					}
TITLE	V	<u> </u>		☑ Delete	TITLE		V				Change	Addition
NAME	TROY, TODI	)		PT Descrie	NAME				, Tina M.			
STREET ADDRESS	5400 LEGAC				STREE	T ADDRESS			gacy Dr.			{
CITY-ST-ZIP	PLANO TX				CITY-	ST-ZIP	Plan	0, -	Tx 75024			
	SV			☐ Delete	TITLE						☐ Change	Addition
		er, d. gilbert			NAME							}
	5400 LEGAC	CY DRIVE				T ADDRESS						
CITY-ST-ZIP	PLANO TX				CITY-	ST-ZIP						
TITLE	AT			☐ Delete	TITLE						☐ Change	Addition
	BARTON, BA				NAME							
	5400 LEGEC	T UK				T ADDRESS	]					
	PLANO TX		Ab. 1 - 200			ST-ZIP	L		ID 07(0)(1) Ct 11 Ct 1	to a second		
I DOTODY C	COUNTY TO ST TO A II	ntormation clinnian with	TOTAL THEORY	TODE DOLDHELL TON	TOO OVOR	antion eta:	ID	onoo 11	IQ 07/3\/i\ Elorido Statutos I	TILINATOR ACTIO	u that that is	arormatica !

rereby 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 trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like impowered.

**SIGNATURE:** 

972/605-1200