

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

FILED  
Feb 16 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # F96000004917 (8)  
1. Corporation Name  
BUSINESS INFORMATION TECHNOLOGY OF DELAWARE, INC



Principal Place of Business  
1800 SUTTEE ST.  
SUITE 770  
CONCORD CA 94520  
US

Mailing Address  
5251 DTC PKWY, SUITE 1400  
ENGLEWOOD CO 80111

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
09/24/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	68-0359839	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23	28	Trust Fund Contribution	<input type="checkbox"/>
Zip	Zip	7. This corporation owes or has paid the current year Intangible	
24	29	Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Country	Country		
25	30		

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	VP
NAME	STEVENSON, BOB	1.2 NAME	Robert Bantman
STREET ADDRESS	5251 DTC PKWY, SUITE 1400	1.3 STREET ADDRESS	1400 N. Providence Rd, Suite 5000
CITY-ST-ZIP	ENGLEWOOD CO 80111	1.4 CITY-ST-ZIP	Media, PA 19063
TITLE	VSTD	2.1 TITLE	VP
NAME	SLINGERLAND, MAC J	2.2 NAME	Walker Mike Neil
STREET ADDRESS	5251 DTC PKWY, SUITE 1400	2.3 STREET ADDRESS	1800 Sutter St, Suite 770
CITY-ST-ZIP	ENGLEWOOD CO 80111	2.4 CITY-ST-ZIP	Concord, CA 94520
TITLE	V	3.1 TITLE	VP
NAME	LOFFREDO, CHRISTOPHER	3.2 NAME	Peter Chapman
STREET ADDRESS	5251 DTC PKWY, SUITE 1400	3.3 STREET ADDRESS	33 City Centre Dr, Suite 578
CITY-ST-ZIP	ENGLEWOOD CO 80111	3.4 CITY-ST-ZIP	Mississauga, ON Canada L5B 2N5
TITLE	P	4.1 TITLE	VP
NAME	MAITLAND, JOHN M	4.2 NAME	James Bradley
STREET ADDRESS	1800 SUTTER ST, SUITE 770	4.3 STREET ADDRESS	5400 LBJ Freeway, Suite 535
CITY-ST-ZIP	CONCORDE CA 94520	4.4 CITY-ST-ZIP	Dallas, TX 75240
TITLE	V	5.1 TITLE	
NAME	SANGUINETTI, JOHN	5.2 NAME	
STREET ADDRESS	1800 SUTTER ST, SUITE 770	5.3 STREET ADDRESS	
CITY-ST-ZIP	CONCORDE CA 94520	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	WHEELER, RUSS	6.2 NAME	
STREET ADDRESS	1800 SUTTER ST, SUITE 770	6.3 STREET ADDRESS	
CITY-ST-ZIP	CONCORDE CA 94520	6.4 CITY-ST-ZIP	

14. I 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: *[Signature]* VP 2/16/98 (303) 730-0100

CR2E034 (10/97)