2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # F9600005702 Jan 20, 2000 8:00 am 1. Entity Name CDSI EDUCATION SERVICES, INC. **Secretary of State** 01-20-2000 90245 047 ***150.00 Principal Place of Business Mailing Address DONNA TURMAN/ACS LEGAL 1 CHRIE CT 2828 N HASKELL, 10TH FL ROCKVILLE MD 20850 DALLAS TX 75204-2954 TO LOUD OLOW US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 52-2003037 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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. B 44.2 17 22 0 2,03 II MASKELL 1016 R2008 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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. Added to Fees (See criteria on back) ГТ Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Addition TITLE ☐ Delete WOODS, ROBERT NAME NAME STREET ADDRESS ONE CURIE COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROCKVILLE MD 20850** Change ☐ Addition ☐ Delete TITLE TITLE BLACK, DAVID W NAME STREET ADDRESS STREET ADDRESS 2828 N. HASKELL 10TH FLOOR CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75204 ☐ Change ☐ Addition Delete TITLE TITLE HORTENSTINE, HENRY G NAME STREET ADDRESS STREET ADDRESS 2828 N. HASKELL 8TH FLOOR CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75204 ☐ Change Addition AS ☐ Delete TITLE TITLE NAME HANEY, HAYS NAME STREET ADDRESS STREET ADDRESS 2828 N HASKELL AVE, 10TH FL CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75204 Delete TITLE ☐ Change Addition TITLE VINEYARD, NANCY P NAME NAME STREET ADDRESS 3969 N. CENTRAL EXPWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75204 Change ☐ Addition ☐ Delete TITLE TITLE NAME RICH, JEFFREY A NAME STREET ADDRESS STREET ADDRESS 2828 N. HASKELL 10TH FLOOR CITY-ST-ZIP CITY-ST-7IP DALLAS TX 75204 13. I hereby certify that the information supplied with this filling 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, with all other like empowered.

214-841-6197

Daytime Phone #

1/5/00

NAME OF SIGNING OFFICER OR DIRECTOR