2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

FILED DOCUMENT # **F97000001072** Feb 19, 2000 8:00 am **Secretary of State** COMPUTER SYSTEMS & APPLICATIONS, INC. 02-19-2000 90005 035 ***150.00 Mailing Address Principal Place of Business 20405 STATE HWY. 249. STE. 600 20405 STATE HWY, 249, STE, 600 HOUSTON TX 77070-3815 HOUSTON TX 77070 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 74-1858971 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current 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 City FL 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE Delete NAME LILY, MICHAEL OLIVER, JAMES T NAME STREET ADDRESS 20405 STATE HWY. 249, STE. 600 STREET ADDRESS CATY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77070 Change ☐ Addition TITLE □ Delete TITLE NAME CLARK, IAN P NAME 20405 STATE HWY. 249, STE. 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77070** ☐ Change Addition ☐ Delete TITLE TITLE **BOESE, GARY** NAME NAME STREET ADDRESS 20405 STATE HWY. 249, STE. 600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77070** Change ☐ Addition **Delete** TITLE TITLE GARCIA, OCTAVIO NAME NAME STREET ADDRESS STREET ADDRESS 20405 STATE HWY. 249, STE. 600 CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX 77070** T/S Change ☐ Addition ☐ Delete TITLE TITLE GULLIVER, DANIEL J NAME NAME STREET ADDRESS 20405 STATE HWY. 249, STE. 600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77070** ☐ Change Addition TITLE ☐ Delete ALBERS, BARNELL NAME NAME 20405 STATE HWY 249, STE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOUSTON TX 77070 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 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

01-28-00