

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F97000001072**

1. Entity Name

COMPUTER SYSTEMS & APPLICATIONS, INC.**FILED****Jan 29, 2001 8:00 am**
Secretary of State

01-29-2001 90115 035 ***150.00

Principal Place of Business

20405 STATE HWY. 249. STE. 600
HOUSTON TX 77070

Mailing Address

20405 STATE HWY. 249. STE. 600
HOUSTON TX 77070

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **74-1858971**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional**
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****C T CORPORATION SYSTEM**
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD LILY, MICHAEL 20405 STATE HWY. 249, STE. 600 HOUSTON TX 77070	<input type="checkbox"/>		
D CLARK, IAN P 20405 STATE HWY. 249, STE. 600 HOUSTON TX 77070	<input type="checkbox"/>		
V BOESE, GARY 20405 STATE HWY. 249, STE. 600 HOUSTON TX 77070	<input type="checkbox"/>	VICE PRESIDENT JEFFREY A BROWN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TS GULLIVER, DANIEL J 20405 STATE HWY. 249, STE. 600 HOUSTON TX 77070	<input type="checkbox"/>	DEBRA D. SHELTON	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D ALBERS, BARNELL 20405 STATE HWY 249 STE 600 HOUSTON TX 77070	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>	DIRECTOR KEUNETH J. KELLY 20405 STATE HWY 249 STE 600 HOUSTON TX 77070	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEBRA D. SHELTON**1-18-01**

Date

281-320-7100

Daytime Phone #

CR2E034 (10/00)