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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700005055 (5)

**EDS INFRASTRUCTURE CORPORATION** 

Principal Place of Business

Mailing Address

## **FILED** Apr 06 1998 8:00am Secretary of State



5400 LEGACY DRIVE 5400 LEGACY DRIVE **PLANO TX 75024 PLANO TX 75024** DO NOT WRITE IN THIS SPACE 3. Date tricorporated or Qualified 09/26/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 5400 LEGACY DR. 75-2714821 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired (HI-4A-66) 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζ<sub>i</sub>p Country 8. This corporation owes or has paid the current year Intangible 75024 24 25 29 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Name 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 84 City 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 Title Change Addition ALBERTHAL JR. LESTER M NAME 1.2 NAME 5400 LEGACY DRIVE STREET ADDRESS 1.3 STREET ADDRESS PLANO TX CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE **K** Addition 2 1 TITLE Change NAME BENAC, WILLIAM P BARBARA BARTON 2.2 NAME 5400 LEGACY DRIVE 5400 LEGACY STREET ADDRESS 2.3 STREET ADDRESS PLANO TX CITY-ST-ZIP PLANO TX 2. 4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition FRIEDLANDER, D G NAME 3.2 NAME 5400 LEGACY DRIVE STREET ADDRESS 3.3 STREET ADDRESS **PLANO TX** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition FERNANDES, GARY J NAME 4. 2 NAME **5400 LEGACY DRIVE** STREET ADDRESS 4.3 STREET ADDRESS **PLANO TX** CITY-ST-ZIP 4.4 CITY-ST-7IP DELETE TITLE 5.1 TITLE Change ☐ Addition HELLER, JEFFREY M NAME 5.2 NAME 5400 LEGACY DRIVE STREET ADDRESS 5.3 STREET ADDRESS PLANO TX CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITUE ☐ Change Addition CASTLE JR, JOHN R NAME 6.2 NAME **5400 LEGACY DRIVE** STREET ADDRESS 6.3 STREET ADDRESS PLANO TX CITY-ST-ZIP 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 supplienental 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 changes, or on an ultrachment with an artifess.

SIGNATURE:

Barbara Barton 3-2798 072/605-120