

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F97000005055 (5)

1. Corporation Name

EDS INFRASTRUCTURE CORPORATION

Principal Place of Business  
5400 LEGACY DRIVE  
PLANO, TX 75024

Mailing Address  
5400 LEGACY DRIVE  
H1 4A 66  
PLANO, TX 75024-3105

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
09/26/1997

4. FEI Number  
75-2714821

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible Personal  
Property Tax ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FLORIDA 32301

81 Name

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

83

84 City

FL

85 Zip Code

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  
NAME  
P/D  
BROWN, RICHARD H  
STREET ADDRESS  
5400 LEGACY DRIVE  
CITY - ST - ZIP  
PLANO, TX 75024

☐ DELETE

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
V/D  
HELLER, JEFFREY M  
STREET ADDRESS  
5400 LEGACY DRIVE  
CITY - ST - ZIP  
PLANO, TX 75024

☐ DELETE

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
S  
FRIEDLANDER, D GILBERT  
STREET ADDRESS  
5400 LEGACY DRIVE  
CITY - ST - ZIP  
PLANO, TX 75024

☐ DELETE

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
T  
KRENZ, SCOTT J  
STREET ADDRESS  
5400 LEGACY DRIVE  
CITY - ST - ZIP  
PLANO, TX 75024

☐ DELETE

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
AS  
MARBLE, SHIRLEY J  
STREET ADDRESS  
5400 LEGACY DRIVE  
CITY - ST - ZIP  
PLANO, TX 75024

☐ DELETE

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
AT  
BARTON, BARBARA  
STREET ADDRESS  
5400 LEGACY DRIVE  
CITY - ST - ZIP  
PLANO, TX 75024

☐ DELETE

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASST TREASURER

3-24-99

Date

9726051200

Daytime Phone #