

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

FILED  
Feb 23, 1999 8:00 am  
Secretary of State

02-23-1999 90073 038 \*\*\*150.00

0533551

DOCUMENT # F97000006050

1. Corporation Name

SELECT SOFTWARE TOOLS, INC.

Principal Place of Business

19600 FAIRCHILD RD., STE. 350  
IRVINE CA 92612

Mailing Address

19600 FAIRCHILD RD., STE. 350  
IRVINE CA 92612

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/17/1997

4. FEI Number

33-0615808

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

☐

No

9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.  
526 E. PARK AVE.  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

TITLE DCEO ☒ DELETE

NAME FROST, STUART  
STREET ADDRESS WESTMORELAND HOUSE, 80-86 BATH RD.  
CITY-ST-ZIP CHELTENHAM, ENGLAND GL537JT

TITLE DP ☒ DELETE

NAME HOLT, EDWARD  
STREET ADDRESS WESTMORELAND HOUSE, 80-86 BATH RD.  
CITY-ST-ZIP CHELTENHAM, ENGLAND GL537JT

TITLE S ☒ DELETE

NAME MCGRATH, SUZANNE  
STREET ADDRESS 19600 FAIRCHILD RD., STE. 350  
CITY-ST-ZIP IRVINE CA 92612

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D CEO ☒ Change ☐ Addition

1.2 NAME BERNARD FISHER  
1.3 STREET ADDRESS WESTMORELAND HOUSE, 80-86 BATH RD.  
1.4 CITY-ST-ZIP CHELTENHAM, ENGLAND GL537JT

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE S ☒ Change ☐ Addition

3.2 NAME BRIAN MORROW  
3.3 STREET ADDRESS 19600 FAIRCHILD # 350  
3.4 CITY-ST-ZIP IRVINE CA 92612

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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 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:

Brian Morrow  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN. 8, 1999

Date

(949) 477-4100

Daytime Phone #

CR2E034 (1/198)