

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000006375 (6)**
1. Corporation Name
TIER TECHNOLOGIES, INC.

Principal Place of Business 1350 TREAT BLVD. STE. 250 WALNUT CREEK CA 94596	Mailing Address 1350 TREAT BLVD. STE. 250 WALNUT CREEK CA 94596
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/03/1997	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 94-3145844	Applied For Not Applicable
22 City & State	23	27 City & State	28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**FLORIDA FILING & SEARCH SERVICES
3260 BALDWIN DR. WEST
TALLAHASSEE FL 32308**

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
85 Zip Code	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COB	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BILDNER, JAMES L	1.2 NAME	
STREET ADDRESS	1350 TREAT BLVD. STE. 250	1.3 STREET ADDRESS	
CITY-ST-ZIP	WALNUT CREEK CA 94596	1.4 CITY-ST-ZIP	
TITLE	COOP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARTON, WILLIAM G	2.2 NAME	
STREET ADDRESS	1350 TREAT BLVD. STE. 250	2.3 STREET ADDRESS	
CITY-ST-ZIP	WALNUT CREEK CA 94596	2.4 CITY-ST-ZIP	
TITLE	CFOV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSS, GEORGE K	3.2 NAME	
STREET ADDRESS	1350 TREAT BLVD. STE. 250	3.3 STREET ADDRESS	
CITY-ST-ZIP	WALNUT CREEK CA 94596	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARTHUR, ALBERT A	4.2 NAME	
STREET ADDRESS	1350 TREAT BLVD. STE. 250	4.3 STREET ADDRESS	
CITY-ST-ZIP	WALNUT CREEK CA 94596	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMPTON, JACQUELINE R	5.2 NAME	
STREET ADDRESS	1350 TREAT BLVD. STE. 250	5.3 STREET ADDRESS	
CITY-ST-ZIP	WALNUT CREEK CA 94596	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LATHAM, F T	6.2 NAME	
STREET ADDRESS	1350 TREAT BLVD. STE. 250	6.3 STREET ADDRESS	
CITY-ST-ZIP	WALNUT CREEK CA 94596	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.

SIGNATURE: *George Ross* **GEORGE ROSS, CFO** 4/15/98 (725) 937-3950

CR2E034 (10/97)