

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90084 044 ***150.00

DOCUMENT # F98000000099

1. Entity Name

APPLIED RESEARCH ASSOCIATES, INC.

Principal Place of Business

Mailing Address

**4300 SAN MATEO BLVD., NE
 SUITE A220
 ALBUQUERQUE NM 87110**

**4300 SAN MATEO BLVD., NE
 SUITE A220
 ALBUQUERQUE NM 87110-1295**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

85-0276434

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ARTMAN, DAVID H
 BDLG. 1142 MISSISSIPPI ROAD
 TYNDALL AFB FL 32403**

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.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. 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
SD	BRATTON, JIMMIE L	4300 SAN MATEO BLVD., NE STE A220	ALBUQUERQUE NM 87110	<input type="checkbox"/>
PD	HIGGINS, CORNELIUS J	4300 SAN MATEO BLVD., NE STE A220	ALBUQUERQUE NM 87110	<input type="checkbox"/>
VD	BLOUIN, SCOTT E	RFD 1, BOX 73	SOUTH ROYALTON VT	<input type="checkbox"/>
CD	COOPER, HENRY F	10016 PARK ROYAL DR.	GREAT FALLS VA	<input type="checkbox"/>
VD	DRAKE, JAMES L	155 MCLENDON DRIVE	RAYMOND MS	<input type="checkbox"/>
VD	TWISDALE, LAWRENCE A	228 CARPATHIAN WAY	RALEIGH NC	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	Bratton, Jimmie L.	4300 San Mateo Blvd. NE Suite A220	Albuquerque NM 87110	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	Higgins, Cornelius J.	4300 San Mateo Blvd., NE Suite A220	Albuquerque NM 87110	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Blouin, Scott E	112 Route 11	Sunapee, NH 03782	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	Eddings, James	4300 San Mateo Blvd., NE Suite A220	Albuquerque NM 87110	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	James Cramer	4300 San Mateo Blvd NE, Suite A220	Albuquerque NM 87110	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Norm Corzine	P.O. Box 16005	Albuquerque NM 87191	<input type="checkbox"/>	<input checked="" type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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:

REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-00

Date

505-891-8074

Daytime Phone #

CR2E034 (9/99)