

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F98000000510

FILED
Jan 16, 2002 8:00 AM
Secretary of State

Entity Name: APPX SOFTWARE, INC.

Current Principal Place of Business:

11363 SAN JOSE BLVD
STE 301
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11363 SAN JOSE BLVD
STE 301
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 54-1464324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIZZELL, STEVEN P
11363 SAN JOSE BLVD STE 301
JACKSONVILLE, FL 32223

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVCS () Delete
Name: FRIZZELL, STEVEN
Address: 11363 SAN JOSE BLVD STE 301
City-St-Zip: JACKSONVILLE, FL

Title: T () Delete
Name: WILKE, MICHAEL
Address: 545 METRO PLACE SUITE 430
City-St-Zip: DUBLIN, OH 43017

Title: D () Delete
Name: THORNTON, ROBERT
Address: 545 METRO PLACE SUITE 430
City-St-Zip: DUBLIN, OH 43017

Title: D () Delete
Name: FARMER, NEAL
Address: 100 CORPORATE RIDGE SUITE 101
City-St-Zip: BIRMINGHAM, AL 35242

Title: S () Delete
Name: DEWITT, GARY
Address: 650 HIGHWAY 27 N
City-St-Zip: LAKE WALES, FL

Title: AS () Delete
Name: FRIZZELL, BRENDA
Address: 11363 SAN JOSE BLVD STE 301
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA B. FRIZZELL

AS

01/16/2002

Electronic Signature of Signing Officer or Director

_____ Date