

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000931

FILED
Jan 15, 2004
Secretary of State

Entity Name: COMPUTER CORPORATION OF AMERICA

Current Principal Place of Business:

500 OLD CONNECTICUT PATH
FRAMINGHAM, MA 01701

New Principal Place of Business:

Current Mailing Address:

500 OLD CONNECTICUT PATH
FRAMINGHAM, MA 01701

New Mailing Address:

FEI Number: 04-3024595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RYAN, RICHARD P
Address: 500 OLD CONNECTICUT PATH
City-St-Zip: FRAMINGHAM, MA 01701

Title: TC () Delete
Name: LAVOIE, RUSSELL
Address: 500 OLD CONNECTICUT PATH
City-St-Zip: FRAMINGHAM, MA 01701

Title: D () Delete
Name: STEWART, RICHARD D
Address: 500 OLD CONNECTICUT PATH
City-St-Zip: FRAMINGHAM, MA 01701

Title: D () Delete
Name: BLAIR, MICHAEL
Address: 500 OLD CONNECTICUT PATH
City-St-Zip: FRAMINGHAM, MA 01701

Title: D () Delete
Name: HOFFMAN, ARNOLD
Address: 500 OLD CONNECTICUT PATH
City-St-Zip: FRAMINGHAM, MA 01701

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:

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: RUSSELL M. LAVOIE

TC

01/15/2004

Electronic Signature of Signing Officer or Director

Date