

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000005595

1. Entity Name
GLOBE DATA SYSTEMS, INC.

Principal Place of Business
300 CONSTANCE DRIVE
WARMINSTER PA 18974

Mailing Address
300 CONSTANCE DRIVE
WARMINSTER PA 18974

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-2323153

Applied For

Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH DINE ISLAND ROAD
PLANTATION FL 33324

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

Barbara A. Burke

BARBARA A. BURKE
SPECIAL ASSISTANT SECRETARY

11-16-01

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.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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 CTS ☐ Delete
NAME KRAUSE, MADDALENA
STREET ADDRESS 300 CONSTANCE DR
CITY-ST-ZIP WARMINSTER PA 18974

TITLE President ☐ Change ☒ Addition
NAME Robert Puleo
STREET ADDRESS 300 Constance Dr
CITY-ST-ZIP Warminster PA 18974

TITLE P ☒ Delete
NAME MESSNER, KIMBER E
STREET ADDRESS 300 CONSTANCE DRIVE
CITY-ST-ZIP WARMINSTER PA 18974

TITLE ☐ Change ☐ Addition
NAME 400004706124--3
STREET ADDRESS -12/05/01--01055--021
CITY-ST-ZIP ****750.00 ****750.00

TITLE C ☐ Delete
NAME SCOLNICK, GLENN
STREET ADDRESS 8888 KEYSTONE CROSSING #690
CITY-ST-ZIP INDIANAPOLIS IN 46240

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME CRISMAN, FORREST E JR
STREET ADDRESS 230 PARK AVENUE SUITE 1616
CITY-ST-ZIP NEW YORK NY 10169

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Delete
NAME RAINES, PHILLIP E
STREET ADDRESS 3435 EMPIRE BLVD SW
CITY-ST-ZIP ATLANTA GA 30354

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPM ☒ Delete
NAME PIZZO, JOSEPH
STREET ADDRESS 300 CONSTANCE DR
CITY-ST-ZIP WARMINSTER PA 18974

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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:

Barbara A. Burke REQUIRED

10/16/01

215-4439414

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 NOV 19 PM 3:14



REINSTATEMENT

DO NOT WRITE IN THIS SPACE

0132402 AT

CR2E034 (5/01)