## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED May 24, 2000 8:00 am Secretary of State DOCUMENT # F9900001902 SAGE SOFTWARE, INC. 05-24-2000 90054 021 \*\*\*150.00 Mailing Address Principal Place of Business 56 TECHNOLOGY DRIVE 56 TECHNOLOGY DRIVE IRVINE CA 92618-2301 IRVINE CA 92618-2301 0000 A \*\*\* 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 95-3664592 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 14. FAT 11. COST OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. DIRECTOR ☐ Addition Change | ☐ Delete TITLE TITLE NAME NAME HANNA, DAVID W ..... STREET ADDRESS STREET ADDRESS 56 TECHNOLOGY DRIVE CITY-ST-ZIP CITY-ST-ZIP IRVINE CA 92618-2301 Senier Viu President Finance + CFO, and Secretary ☐ Addition **SCFO** ☐ Delete TITLE NAME NAME ECKSTAEDT, JAMES R STREET ADDRESS STREET ADDRESS **56 TECHNOLOGY DRIVE** CITY-ST-ZIP CITY-ST-ZIP IRVINE CA 92618-2301\_ Addition | Delete TITLE AS . - ----TITLE NAME young NAME CAVANAUGH, MATTHEW E STREET ADDRESS STREET ADDRESS **56 TECHNOLOGY DRIVE** CITY-ST-ZIP CITY-ST-ZIP IRVINE CA 92618-2301 ☐ Addition ☐ Delete TITLE TITLE COO NAME NAME BUTLER, DAVID R STREET ADDRESS STREET ADDRESS **56 TECHNOLOGY DRIVE** CITY-ST-ZIP CITY-ST-ZIP IRVINE CA 92618-2301 ☐ Change ☐ Addition ଯ Delete $\mathbf{V}_{2NN}$ TITLE GOLD, JEFFREY E NAME NAME STREET ADDRESS STREET ADDRESS 8211 SIERRA COLLEGE BLVD SUITE 44 CITY-ST-ZIP CITY-ST-ZIP ROSEVILLE CA 95661-9406 ☐ Change ☐ Addition Delete TITLE TITLE RIVIERE, GEORGE NAME STREET ADDRESS STREET ADDRESS **56 TECHNOLOGY DRIVE** CITY-ST-ZIP CITY-ST-ZIP IRVINE CA 92618-2301

7. R. Eckstautt: Sr. VP Finance SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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