

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 08, 2000 8:00 am**  
**Secretary of State**  
03-08-2000 90003 003 \*\*\*158.75

**DOCUMENT # F99000004211**

1. Entity Name

**DALEEN TECHNOLOGIES, INC.**

Principal Place of Business

902 CLINT MOORE ROAD, SUITE 230  
BOCA RATON FL 33487

Mailing Address

902 CLINT MOORE ROAD, SUITE 230  
BOCA RATON FL 33487-2846

2. Principal Place of Business

1750 CLINT MOORE RD

Suite, Apt. #, etc.

3. Mailing Address

1750 CLINT MOORE RD

Suite, Apt. #, etc.

City & State  
BOCA RATON, FL

City & State  
BOCA RATON, FL

Zip  
33487

Country

Zip

Country

4. FEI Number  
65-0944514

~~APPLIED FOR~~

Applied For

Not Applicable

5. Certificate of Status Desired  
XX

**\$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 PINE 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

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 \$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  
DCEO  
DALEEN, JAMES  
902 CLINT MOORE ROAD, SUITE 230  
BOCA RATON FL 33487 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
COR, NEIL E  
2 MID AMERICA PLAZA, SUITE 200  
OAKBROOK TERRACE, IL 60181 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
COREY, DAVID P  
902 CLINT MOORE ROAD, SUITE 230  
BOCA RATON FL 33487 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ROPER, WILLIAM A JR.  
1241 CAVE STREET  
LAJOLLA, CA 92037 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
SCHELL, RICHARD A  
902 CLINT MOORE ROAD, SUITE 230  
BOCA RATON FL 33487 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VS  
WAGMAN, STEPHEN M  
902 CLINT MOORE ROAD, SUITE 230  
BOCA RATON FL 33487 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CATAFORD, PAUL G  
200 BAY STREET, SOUTH TOWER, SUITE 3120  
TORONTO, ONT., CANADA ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FOREMAN, DANIEL  
208 SOUTH LASALLE STREET, 10TH FLOOR  
CHICAGO IL 60604 ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-21-00

Date

561-999-8000

Daytime Phone #

CR2E034 (9/99)