2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000005446

Principal Place of Business		Mailing Address								
C/O MICROAGE. INC. 2400 SOUTH MICROA TEMPE AZ 85282	/LEGAL DEPT MS #8 GE WAY	C/O MICROAGE. INC./LEGAL DEPT., MS #8 2400 SOUTH MICROAGE WAY TEMPE AZ 85282-1824								
2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address Suite, Apt. #, etc. City & State								
							Zip	Country	Zip	Country

FILED May 04, 2000 8:00 am Secretary of State 05-04-2000 90025 030 ***150.00

12.00	-					- 1 1001190 1410 16110 16141 8641 6641 6641	TI Ba klı Bal gı	BOUS BUBBL BS	D(
2. Principal Place of Business		3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SF	'ACE				
City & State		City & State			4. F	FEI Number 86-0629406			pplied For ot Applicable			
Zip	Country	Zip 85282=1896	Coun	try	5. (Certificate of Status Desired		8.75 Add				
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent							
					Name							
NRAI SERVICES, INC. 526 EAST PARK AVENUE			Street Address (P.O. Box Number is Not Acceptable)									
				Officer Addition (1.0. Dox Herring) to Hor Acceptains)								
TALL	AHASSEE FL 32301]								
				City	City FL Zip Code							
8 The above	named entity submits this statement for t	he nurnose of changing its	registere	ed office or	registered agr	ent, or both, in the State of Florin		L				
e. The above	Harned entity submits this statement for t	ne purpose or brianging its	registere	od onice of	rogistored ag							
CIONIATUDE												
SIGNATURE _	Signature, typed or printed name of registered agent and	ture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
9 This corpo	pration is eligible to satisfy its Intangible	FILE NOW!	!!! FEE	IS \$150.0	00							
•	equirement and elects to do so.	After MAY 1, 2000 Fee will be \$550.00				 Election Campaign Finar Trust Fund Contribution. 	icing)0 May Be d to Fees			
(See criteri	ia on back)	Make Check Payab	ole to De	partmen	t of State	Trast Fario Contribution.		Adde	J (0 1 603			
11.	OFFICERS AND D	RECTORS	12.		AD	DITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR				
TITLE	Р	X Delete	TITU		Preside		ĺ	Change	X Addition			
NAME	MANTON, JAMES G		NAM	_	Donald	J. Lyons						
STREET ADDRESS	E100 000111 IIIIONO/ACE 11/11			ET ADDRESS	2400 S.	MicroAge Way						
CITY-ST-ZIP	TEMPE AZ 85282			-ST-ZIP	Tempe.	AZ 85282-1896						
TITLE	VS	☐ Delete	TITLE					☐ Change	☐ Addition			
NAME STREET ADDRESS	DOMAZ, JAMES H		NAM STRE	ET ADDRESS								
CITY-ST-ZIP	2400 SOUTH MICROAGE WAY TEMPE AZ 85282			-ST-ZIP								
TITLE	T	X Delete	TITLE		Vice Pr	esident; Treasur	er [Change	X Addition			
NAME	DANIEL, JAMES R	LA Delete	NAM			I L. Storck	•		_			
STREET ADDRESS	2400 SOUTH MICROAGE WAY		STRE	ET ADDRESS		. MicroAge Way						
CITY-ST-ZIP	TEMPE AZ 85282		CITY	-ST-ZIP		AZ 85282-1896						
TITLE	D	☐ Delete	TITLE		Chairma	an of the Board	(Change	☐ Addition			
NAME	MCKEEVER, JEFFREY D		NAM									
STREET ADDRESS	2400 SOUTH MICROAGE WAY			ET ADDRESS -ST-ZIP	<u>'</u>							
CITY-ST-ZIP	TEMPE AZ 85282		_	~			1 . 1 . 1		VT Addition			
TITLE		☐ Delete	TITLE NAM			resident, Real Es	tate 1	change	X Addition			
NAME STREET ADDRESS				ET ADDRESS		. Lyons	•					
CITY-ST-ZIP			•	-ST-ZIP .	2409 S` Tembe -	<u> ÂZic88282-4896</u>						
TITLE		☐ Delete	TITLE			ant Secretary		Change	Addition			
NAME			NAM			e A. Hughes		-				
STREET ADDRESS			STRE	ET ADDRESS	2400 S	. MicroAge Way						
CITY-ST-ZIP				-ST-ZIP		AZ 85282-1896						
13. I hereby o	certify that the information supplied with the	nis filing does not qualify for	r the exe	mption stat	ted in Section	119.07(3)(i), Florida Statutes. I fu	irther certif	y 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:

480-366-2320

Daytime Phone #