

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G18373** (2)  
1. Corporation Name  
**COMPUTER MANAGEMENT SCIENCES, INC.**

Principal Place of Business  
**8133 BAYMEADOWS WAY  
JACKSONVILLE FL 32256**

Mailing Address  
**8133 BAYMEADOWS WAY  
JACKSONVILLE FL 32256**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>01/12/1983</b>	
4. FEI Number <b>59-2264633</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>DAVIS, JERRY W. 8133 BAY MEADOWS WAY JACKSONVILLE FL 32256</b>	
10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City <b>FL</b> 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVIS, JERRY W	1.2 NAME	ESPINOZA, P. E.
STREET ADDRESS	8133 BAYMEADOWS WAY	1.3 STREET ADDRESS	8133 BAYMEADOWS WAY
CITY-ST-ZIP	JACKSONVILLE FL 32256	1.4 CITY-ST-ZIP	JACKSONVILLE FL 32256
TITLE	DVS <input type="checkbox"/> DELETE	2.1 TITLE	VIT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEIGHT, ANTHONY V	2.2 NAME	WHITE, DON
STREET ADDRESS	8133 BAYMEADOWS WAY	2.3 STREET ADDRESS	8133 BAYMEADOWS WAY
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	JACKSONVILLE FL 32256
TITLE	DV <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LONGHI, LARRY A	3.2 NAME	
STREET ADDRESS	8133 BAYMEADOWS WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32256	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLAUCA, ANTHONY	4.2 NAME	
STREET ADDRESS	8133 BAYMEADOWS WAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	
TITLE	DV <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MINARDI, DAVID C	5.2 NAME	
STREET ADDRESS	8133 BAYMEADOWS WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32256	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STONECIPHER, HARRY C	6.2 NAME	
STREET ADDRESS	8133 BAYMEADOWS WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on the back of the report with an address.

SIGNATURE:

JERRY W. DAVIS

4/30/98

904/733-8955

CR2E034 (1097)