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Mar 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G28490** (2)

1. Corporation Name
COMPUTER SCIENCE INNOVATIONS, INC.



Principal Place of Business 1235 EVANS ROAD MELBOURNE FL 32904 US	Mailing Address 1235 EVANS ROAD MELBOURNE FL 32904 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/18/1983	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 59-2272365	Applied For Not Applicable
22 City & State	27	28 City & State	29	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent VICTOR S KOSTRO 1825 S RIVERVIEW DR MELBORNE FL 32901				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

FL

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	PD	1.1 TITLE	
NAME	MILLIGAN, GEORGE H.	1.2 NAME	
STREET ADDRESS	33 INTERLAKEN RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	
TITLE	CD	2.1 TITLE	
NAME	RITTEREISER, FREDERIC	2.2 NAME	
STREET ADDRESS	1900 MARKET ST STE 701	2.3 STREET ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	SILBERHORN, EDWARD J.	3.2 NAME	
STREET ADDRESS	205 VANBUREN ST 400	3.3 STREET ADDRESS	
CITY-ST-ZIP	HERNDON VA	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	Reinman, James L
STREET ADDRESS		4.3 STREET ADDRESS	1825 S Riverview Dr
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Melbourne FL 32901
TITLE		5.1 TITLE	
NAME		5.2 NAME	Tate, Raymond T
STREET ADDRESS		5.3 STREET ADDRESS	17929 Pond Road
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Ashton, MD 20861
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 an attachment with an address.

SIGNATURE:

George H Milligan 2/27/98 407-676-3923

CR2E034 (10/97)