

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H31600

1. Corporation Name
HTE-UCS, INC.

Principal Place of Business
2005 WEST CYPRESS CREEK ROAD
STE 100
FT. LAUDERDALE FL 33309-1835
US

Mailing Address
2005 WEST CYPRESS CREEK ROAD
STE 100
FT. LAUDERDALE FL 33309-1835
US

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90296 081 ***150.00

05-06-1999 90296 082 *****8.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/28/1984

4. FEI Number
59-2486196

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.



Yes ☐ No

9. Name and Address of Current Registered Agent

RAMOS, DANIA
2005 WEST CYPRESS CREEK ROAD
STE 100
FT. LAUDERDALE FL 33309-1835

10. Name and Address of New Registered Agent

81 Name

L.A. Gornito, Jr., Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

149-F S. Ridgewood Avenue

83

84 City

Daytona Beach,

FL

85 Zip Code
32114

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, on 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

4/29/99

12. OFFICERS AND DIRECTORS

| | | |
|----------------|------------------------|---------------------------------|
| TITLE | PD | <input type="checkbox"/> DELETE |
| NAME | RAMOS, O. F. | |
| STREET ADDRESS | 14020 CARLTON DRIVE | |
| CITY-ST-ZIP | DAVIE FL | |
| TITLE | VS | <input type="checkbox"/> DELETE |
| NAME | NORTH, WILLIAM KNOX | |
| STREET ADDRESS | 2130 N.W. 82ND TERRACE | |
| CITY-ST-ZIP | SUNRISE FL | |
| TITLE | TV | <input type="checkbox"/> DELETE |
| NAME | RAMOS, DANIA | |
| STREET ADDRESS | 20201 NW 7TH STREET | |
| CITY-ST-ZIP | PEMBROKE PINES FL | |
| TITLE | V | <input type="checkbox"/> DELETE |
| NAME | NELSON, ROBERT W. | |
| STREET ADDRESS | 1310 NE 27 WAY | |
| CITY-ST-ZIP | POMPANO BCH FL | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|----------------------------|------------------------------------------------------------------------------|
| 1.1 TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | | |
| 1.3 STREET ADDRESS | | |
| 1.4 CITY-ST-ZIP | | |
| 2.1 TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | | |
| 2.3 STREET ADDRESS | | |
| 2.4 CITY-ST-ZIP | | |
| 3.1 TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY-ST-ZIP | | |
| 4.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | | |
| 4.3 STREET ADDRESS | | |
| 4.4 CITY-ST-ZIP | | |
| 5.1 TITLE | C/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME | Dennis J. Harward | |
| 5.3 STREET ADDRESS | 1000 Business Center Drive | |
| 5.4 CITY-ST-ZIP | Lake Mary, FL 32746 | |
| 6.1 TITLE | V/S/T | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME | L.A. Gornito, Jr. | |
| 6.3 STREET ADDRESS | 149-F S. Ridgewood Avenue | |
| 6.4 CITY-ST-ZIP | Daytona Beach, FL 32114 | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered.

SIGNATURE:

Dania Ramos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 (954) 771-8116

Date

Daytime Phone #

CR2E034 (1/98)

0288572