

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H31600

1. Entity 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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2486196

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORNTO, L.A. JR.
149 F SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH, FL. 32114

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, 2001 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 P ☒ Delete
NAME HEAFY, BRIAN B.
STREET ADDRESS 404 NEW WATERFORD PL
CITY-ST-ZIP LONGWOOD, FL. 32779

TITLE P ☐ Change ☒ Addition
NAME LOUGHRY, JOSEPH M. III
STREET ADDRESS 3220 OAKMONT TERRACE
CITY-ST-ZIP LONGWOOD, FL. 32779

TITLE EUSD ☐ Delete
NAME GORNTO, L.A. JR.
STREET ADDRESS 149 F SOUTH RIDGEWOOD AVENUE
CITY-ST-ZIP DAYTONA BEACH, FL. 32114

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

TITLE V ☒ Delete
NAME FEINBERG, MELES
STREET ADDRESS 8238 NW 41ST STREET
CITY-ST-ZIP CORAL SPRINGS, FL. 33065

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

TITLE V ☒ Delete
NAME NELSON, ROBERT W.
STREET ADDRESS 1310 NE 27 WAY
CITY-ST-ZIP POMPANO BCH FL

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

TITLE VCTA ☐ Delete
NAME FALOTICO, SUSAN D.
STREET ADDRESS 1724 FOUNTAINHEAD DR.
CITY-ST-ZIP LAKE MARY, FL. 32746

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

TITLE V ☒ Delete
NAME MERSCH, THOMAS F.
STREET ADDRESS 2879 BAYAN BLVD CLN.W.
CITY-ST-ZIP DOCA RATON, FL. 33431

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

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

SUSAN D. FALOTICO 4/23/01 407-304-3235
Date Daytime Phone #

CR2E034 (10/00)