


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91032 020 ***158.75

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	04212004 Chg-P CR2E034 (10/03)	
4. FEI Number 59-2486196				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOUGHRY, JOSEPH M III 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTAS FALOTICO, SUSAN D 1000 BUSINESS CENTER DRIVE LAKE MARY, FL 32746	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/CF <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUSH, LESLIE S 1285 DRUMMERS LANE WAYNE, PA 19087	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURATORE, MICHAEL K 600 LAUREL OAK ROAD VOORHEES, NJ 08043	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSS, LAWRENCE A 1285 DRUMMERS LANE WAYNE, PA 19087	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV/AS/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUANE, MICHAEL J 1285 DRUMMERS LANE WAYNE, PA 19087	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV/AS/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: 4/22/04 Daytime Phone #: 407-304-3235		

Attachment

44037431

Block 11 Additions to HTE-UCS Inc. Officers/Directors

#H31600

H31600

Title	Name:	Address:
CE	Robert F. Clarke	680 East Swedesford Road Wayne, PA 19087
CF	Bruce E. Langston	680 East Swedesford Road Wayne, PA 19087
P	Gilbert O. Santos	1000 Business Center Drive Lake Mary, FL 32746
AVIAS	Sara G. Armstrong	680 East Swedesford Road Wayne, PA 19087
AVIAS	Andrew P. Bronstein	680 East Swedesford Road Wayne, PA 19087