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Apr 04 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # H80911 (1) 1. Corporation Name COMPUTER APPLIED MANAGEMENT SYSTEMS, INC.			
Principal Place of Business 800 CORTEZ RD., W. BRADENTON FL 34207 US		Mailing Address 800 CORTEZ RD., W. BRADENTON FL 34207-1432 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 10/16/1985		3a. Date of Last Report 04/01/1996	
4. FEI Number 59-2646949		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent CONLEY, JEFFREY A. 800 CORTEZ RD., W. BRADENTON FL 34207		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS 1.1 TITLE DV 1.2 NAME CONLEY, ROGER P. 1.3 STREET ADDRESS 2401 MANATEE AVE WEST 1.4 CITY-ST-ZIP BRADENTON FL 1.5 TITLE D 1.6 NAME CONLEY, JEFFREY A. 1.7 STREET ADDRESS 800 CORTEZ RD WEST 1.8 CITY-ST-ZIP BRADENTON FL 1.9 TITLE D 1.10 NAME CONLEY, ILEY 1.11 STREET ADDRESS 800 CORTEZ RD WEST 1.12 CITY-ST-ZIP BRADENTON FL 1.13 TITLE 1.14 NAME 1.15 STREET ADDRESS 1.16 CITY-ST-ZIP 1.17 TITLE 1.18 NAME 1.19 STREET ADDRESS 1.20 CITY-ST-ZIP 1.21 TITLE 1.22 NAME 1.23 STREET ADDRESS 1.24 CITY-ST-ZIP 1.25 TITLE 1.26 NAME 1.27 STREET ADDRESS 1.28 CITY-ST-ZIP 1.29 TITLE 1.30 NAME 1.31 STREET ADDRESS 1.32 CITY-ST-ZIP 1.33 TITLE 1.34 NAME 1.35 STREET ADDRESS 1.36 CITY-ST-ZIP 1.37 TITLE 1.38 NAME 1.39 STREET ADDRESS 1.40 CITY-ST-ZIP 1.41 TITLE 1.42 NAME 1.43 STREET ADDRESS 1.44 CITY-ST-ZIP 1.45 TITLE 1.46 NAME 1.47 STREET ADDRESS 1.48 CITY-ST-ZIP 1.49 TITLE 1.50 NAME 1.51 STREET ADDRESS 1.52 CITY-ST-ZIP 1.53 TITLE 1.54 NAME 1.55 STREET ADDRESS 1.56 CITY-ST-ZIP 1.57 TITLE 1.58 NAME 1.59 STREET ADDRESS 1.60 CITY-ST-ZIP 1.61 TITLE 1.62 NAME 1.63 STREET ADDRESS 1.64 CITY-ST-ZIP 1.65 TITLE 1.66 NAME 1.67 STREET ADDRESS 1.68 CITY-ST-ZIP 1.69 TITLE 1.70 NAME 1.71 STREET ADDRESS 1.72 CITY-ST-ZIP 1.73 TITLE 1.74 NAME 1.75 STREET ADDRESS 1.76 CITY-ST-ZIP 1.77 TITLE 1.78 NAME 1.79 STREET ADDRESS 1.80 CITY-ST-ZIP 1.81 TITLE 1.82 NAME 1.83 STREET ADDRESS 1.84 CITY-ST-ZIP 1.85 TITLE 1.86 NAME 1.87 STREET ADDRESS 1.88 CITY-ST-ZIP 1.89 TITLE 1.90 NAME 1.91 STREET ADDRESS 1.92 CITY-ST-ZIP 1.93 TITLE 1.94 NAME 1.95 STREET ADDRESS 1.96 CITY-ST-ZIP 1.97 TITLE 1.98 NAME 1.99 STREET ADDRESS 1.100 CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.5 TITLE 1.6 NAME 1.7 STREET ADDRESS 1.8 CITY-ST-ZIP 1.9 TITLE 1.10 NAME 1.11 STREET ADDRESS 1.12 CITY-ST-ZIP 1.13 TITLE 1.14 NAME 1.15 STREET ADDRESS 1.16 CITY-ST-ZIP 1.17 TITLE 1.18 NAME 1.19 STREET ADDRESS 1.20 CITY-ST-ZIP 1.21 TITLE 1.22 NAME 1.23 STREET ADDRESS 1.24 CITY-ST-ZIP 1.25 TITLE 1.26 NAME 1.27 STREET ADDRESS 1.28 CITY-ST-ZIP 1.29 TITLE 1.30 NAME 1.31 STREET ADDRESS 1.32 CITY-ST-ZIP 1.33 TITLE 1.34 NAME 1.35 STREET ADDRESS 1.36 CITY-ST-ZIP 1.37 TITLE 1.38 NAME 1.39 STREET ADDRESS 1.40 CITY-ST-ZIP 1.41 TITLE 1.42 NAME 1.43 STREET ADDRESS 1.44 CITY-ST-ZIP 1.45 TITLE 1.46 NAME 1.47 STREET ADDRESS 1.48 CITY-ST-ZIP 1.49 TITLE 1.50 NAME 1.51 STREET ADDRESS 1.52 CITY-ST-ZIP 1.53 TITLE 1.54 NAME 1.55 STREET ADDRESS 1.56 CITY-ST-ZIP 1.57 TITLE 1.58 NAME 1.59 STREET ADDRESS 1.60 CITY-ST-ZIP 1.61 TITLE 1.62 NAME 1.63 STREET ADDRESS 1.64 CITY-ST-ZIP 1.65 TITLE 1.66 NAME 1.67 STREET ADDRESS 1.68 CITY-ST-ZIP 1.69 TITLE 1.70 NAME 1.71 STREET ADDRESS 1.72 CITY-ST-ZIP 1.73 TITLE 1.74 NAME 1.75 STREET ADDRESS 1.76 CITY-ST-ZIP 1.77 TITLE 1.78 NAME 1.79 STREET ADDRESS 1.80 CITY-ST-ZIP 1.81 TITLE 1.82 NAME 1.83 STREET ADDRESS 1.84 CITY-ST-ZIP 1.85 TITLE 1.86 NAME 1.87 STREET ADDRESS 1.88 CITY-ST-ZIP 1.89 TITLE 1.90 NAME 1.91 STREET ADDRESS 1.92 CITY-ST-ZIP 1.93 TITLE 1.94 NAME 1.95 STREET ADDRESS 1.96 CITY-ST-ZIP 1.97 TITLE 1.98 NAME 1.99 STREET ADDRESS 1.100 CITY-ST-ZIP			
14. I do 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: <u>Iley Conley</u> <u>Iley Conley</u> <u>Iley Conley</u> <u>Iley Conley</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3-31-97 (941) 755-8531 Date Daytime Phone #			

CR2E034 (9/96)