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

Feb 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 🦼 Secretary of State annual report Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name J53653 (8) SYNERGISTIC SOFTWARE SYSTEMS, INC. Principal Place of Business Mailing Address 442 B NORTH THIRD STREET 8300 GREENSBORD DRIVE **NEPTUNE BCH FL 32250-7029** SUITE 400 DO NOT WRITE IN THIS SPACE MCLEAN VA 22102 3. Date Incorporated or Qualified 01/21/1987 2. Principal Place of Business 28, Mailing Address Applied For THIRD ST 442 NORTH 21 59-2755750 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State ity & State 6. Election Campaign Financing \$5.00 May Be BCH FL NEPTUNE  $\Box$ 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 32266 ันไร Personal Property Tax due June 30. Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TOUSEY, CLAY B. JR. 2600 INDEPENDENT SQUARE 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32202 City Zip Code 85 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 regulred when reinstating) Signation, typical or printed name of registered agent and title diapph; abic DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. PRESIDENT TITLE DELETE 1.1 TITLE Change Addition LEE WINTRODE JOHNSTON, HOOKS K NAME 1.2 NAME 8300 GREENSBORO DR., STE 400 442 THIRD ST STREET ADDRESS 1.3 STREET ADDRESS MCLEAN VA 32266 NEPTUNE DCH CITY - \$1 - ZIP 1.4 CITY - ST - ZIP Addition DELETE TITLE CFO 2.1 TITLE **NELSON, KENNETH T** NAME 2.2 NAME 8300 GREENSBORO DR., STE 400 STREET ADDRESS 2 3 STREE1 ADDRESS MCLEAN VA CITY-ST-ZIP 2.4 CITY-ST-2IP DELETE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-SI-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-S1-ZIP 5.4 CITY - ST - ZIP TITLE DELETE Change \_\_\_ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4.City-St-Zip

14. Thereby 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 eath; 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 on an attachment with an address.

SIGNATURE:

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