

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 28, 2001 8:00 am**  
**Secretary of State**

04-28-2001 90005 011 \*\*\*150.00

**DOCUMENT # K27001**

1. Entity Name

**KOGER EQUITY, INC.**

Principal Place of Business

**8880 FREEDOM CROSSING TRAIL  
STE 100  
JACKSONVILLE FL 32256-9920**

Mailing Address

**P.O. BOX 58120  
JACKSONVILLE FL 32241-8120**

2. Principal Place of Business

**433 Plaza Real, Ste. 335**

3. Mailing Address

**8880 Freedom Crossing Trail**

Suite, Apt. #, etc.

**Suite 335**

Suite, Apt. #, etc.

**Suite 101**

City &amp; State

**Boca Raton, FL**

City &amp; State

**Jacksonville, FL**

Zip

**33432**

Country

**USA**

Zip

**32256**

Country

**USA**

4. FEI Number

**59-2898045**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

TITLE	DP	<input type="checkbox"/> Delete
NAME	TEAGLE, JAMES C	
STREET ADDRESS	8880 FREEDOM CROSSING TRL- STE 100	
CITY-ST-ZIP	JACKSONVILLE FL 32256-9920	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	JENKINS, W. LAWRENCE	
STREET ADDRESS	8880 FREEDOM CROSSING TRL- STE 100	
CITY-ST-ZIP	JACKSONVILLE FL 32256-9920	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LANTZSCH, G. CHRISTIAN	
STREET ADDRESS	SPANISH TRACT ROAD	
CITY-ST-ZIP	SEWICKLEY PA	
TITLE	V	<input type="checkbox"/> Delete
NAME	STEPHENS, JAMES L.	
STREET ADDRESS	8880 FREEDOM CROSSING TRL- STE 100	
CITY-ST-ZIP	JACKSONVILLE FL 32256-9920	
TITLE	DC	<input type="checkbox"/> Delete
NAME	HUGHES, VICTOR A.	
STREET ADDRESS	8880 FREEDOM CROSSING TRL- STE 100	
CITY-ST-ZIP	JACKSONVILLE FL 32256-9920	
TITLE	DV	<input type="checkbox"/> Delete
NAME	HILEY, DAVID B	
STREET ADDRESS	8880 FREEDOM CROSSING TRL- STE 100	
CITY-ST-ZIP	JACKSONVILLE FL 32256-9920	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CEO D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas J. Crocker	
STREET ADDRESS	433 Plaza Real, Suite 335	
CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pike Aloian	
STREET ADDRESS	8880 Freedom Crossing TRL - Ste 100	
CITY-ST-ZIP	Jacksonville, FL 32256-9920	
TITLE	V CAO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: *James L. Stephens*

James L. Stephens, VP/CAO

3/27/01

(904) 538-8830

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Document #  
K27001

Attachment to 2001 Uniform Business Report  
Document #K27001  
Koger Equity, Inc.

Additional officers and directors:

540689

Benjamin C. Bishop, Jr.	Director
John R. S. Jacobsson	Director
Lee S. Neibart	Director
George F. Staudter	Director
Robert E. Onisko	Chief Financial Officer
Christopher L. Becker	Senior Vice President
Thomas C. Brockwell	Senior Vice President
Drew P. Cunningham	Senior Vice President