

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000007146

FILED
Apr 21, 2002 8:00 AM
Secretary of State

Entity Name: PROWESS TECHNICAL INFORMATION SERVICES LLC

Current Principal Place of Business:

11929 E. COLONIAL DR, SUITE 348
ORLANDO, FL 32826

New Principal Place of Business:

Current Mailing Address:

11929 E. COLONIAL DR, SUITE 348
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 59-3652738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALBRAITH, APRIL D
11929 E. COLONIAL DR, SUITE 348
ORLANDO, FL 32826 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: V () Delete
Name: MILLIGAN, WARREN T
Address: 11929 E. COLONIAL DR, SUITE 348
City-St-Zip: ORLANDO, FL 32826

Title: V () Delete
Name: GALBRAITH, APRIL D
Address: 11929 E. COLONIAL DR, SUITE 348
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MILLIGAN, WARREN T
Address: 11929 E. COLONIAL DR, SUITE 348
City-St-Zip: ORLANDO, FL 32826

Title: MGRM (X) Change () Addition
Name: GALBRAITH, APRIL D
Address: 11929 E. COLONIAL DR, SUITE 348
City-St-Zip: ORLANDO, FL 32826

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: APRIL D GALBRAITH

MGRM

04/21/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date