2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 16, 2000 8:00 am Secretary of State **DOCUMENT # P01648** 1. Entity Name DATATRACE INFORMATION SERVICES COMPANY 02-16-2000 90068 039 ***150.00 Principal Place of Business Mailing Address 101 GATEWAY CENTER PARKWAY 101 GATEWAY CENTER PARKWAY **GATEWAY ONE GATEWAY ONE** RICHMOND VA 23235-5153 RICHMOND VA 23235-5153 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 54-1268834 Not Applicable Zip Country Country Zip \$8:75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SLOAN, F. LINTON Street Address (P.O. Box Number is Not Acceptable) 3922 COCONUT PALM DRIVE SUITE 102 **TAMPA FL 33619** City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition Delete TITLE TITLE FOSTER, CHARLES H. JR. NAME NAME STREET ADDRESS 101 GATEWAY CTR PKWY GATEWAY ONE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **RICHMOND VA 23235-5153** ☐ Change ☐ Addition Delete TITLE TITLE EVANS, G WILLIAM NAME NAME 101 GATEWAY CTR PKWY GATEWAY ONE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **RICHMOND VA 23235-5153** ☐ Addition TITLE Change Delete TITLE WEBER, JOHN D NAME NAME 101 GATEWAY CTR PKWY GATEWAY ONE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **RICHMOND VA 23235-5153** ☐ Change ☐ Addition ☐ Delete TITLE TITLE alpert, janet a. NAME STREET ADDRESS STREET ADDRESS 101 GATEWAY CTR PKWY GATEWAY ONE CITY-ST-7IP CITY-ST-ZIP **RICHMOND VA 23235-5153** ☐ Change ☐ Addition PD TITLE □ Delete TITLE NAME SMITH, R.K. JR. NAME 101 GATEWAY CTR PKWY GATEWAY ONE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RICHMOND VA 23235-5153 Change Addition **VPD** TITLE Delete TITLE PALMER, ROBERT J NAME NAME STREET ADDRESS 101 GATEWAY CTR PKWY GATEWAY ONE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RICHMOND VA 23235-5153 13. I hereby certify that the information supplied with this filling 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 prosignature 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: John D. Weber 2/2/00 804-267-8000

SIGNATURE: Date Daytime Phone #