

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000001869

FILED  
Jan 10, 2003  
Secretary of State

Entity Name: SABRE SOFTWARE, INC.

**Current Principal Place of Business:**

1079 CEPHAS DRIVE  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

1079 CEPHAS DRIVE  
CLEARWATER, FL 33765

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LITTLE, THOMAS C ESQUIRE  
2123 N.E. COACHMAN ROAD  
SUITE A  
CLEARWATER, FL 33765

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                      PRES                      ( ) Change (X) Addition  
Name:                      SCARFIA, MICHAEL J  
Address:                      1079 CEPHAS DRIVE  
City-St-Zip:                      CLEARWATER, FL 33765

Title:                      VP                      ( ) Change (X) Addition  
Name:                      RIDDLE, GERALD  
Address:                      1051 CEPHAS DRIVE  
City-St-Zip:                      CLEARWATER, FL 33765

Title:                      S/T                      ( ) Change (X) Addition  
Name:                      BERRY, JENNIFER M  
Address:                      1079 CEPHAS DRIVE  
City-St-Zip:                      CLEARWATER, FL 33765

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER M. BERRY

S/T

01/10/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date