

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000088474

FILED
Mar 17, 2003
Secretary of State

Entity Name: CONTINUUM SOFTWARE DEVELOPMENT, INC.

Current Principal Place of Business:

5662 BAXTER LAKE DR
JACKSONVILLE, FL 32258 US

New Principal Place of Business:

Current Mailing Address:

5662 BAXTER LAKE DR
JACKSONVILLE, FL 32258 US

New Mailing Address:

FEI Number: 46-0496171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSER, THOMAS J
5662 BAXTER LAKE DR
JACKSONVILLE, FL 32258 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

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:

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: N/A () Change (X) Addition
Name: CONTINUUM SOFTWARE D, EVELOPMENT
Address: 5662 BAXTER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: N/A () Change (X) Addition
Name: CONTINUUM SOFTWARE D, EVELOPMENT
Address: 5662 BAXTER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: N/A () Change (X) Addition
Name: CONTINUUM SOFTWARE D, EVELOPMENT
Address: 5662 BAXTER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: P/D () Change (X) Addition
Name: BUSER, THOMAS J
Address: 5662 BAXTER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: D () Change (X) Addition
Name: KRENEK, LEE
Address: PO BOX 2291
City-St-Zip: PONTE VEDRA BEACH, FL 32004 US

Title: D () Change (X) Addition
Name: MENDIA, VICTOR
Address: 12843 QUINCY BAY DR
City-St-Zip: JACKSONVILLE, FL 32224 US

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: THOMAS J BUSER

P/D

03/17/2003

Electronic Signature of Signing Officer or Director

Date