

2002 UNIFORM BUSINESS REPORT (UBR)

10F2

DOCUMENT # P17227

1. Entity Name
H. TECH, INC.

FILED

02 AUG 27 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

| | |
|--|---|
| Principal Place of Business 700 TECHNOLOGY PARK DR. BILLERICA MA 01821 | Mailing Address 3033 SCIENCE PARK RD SAN DIEGO CA 92121 |
|--|---|

| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|---|---|

| | |
|--------------|--------------|
| City & State | City & State |
| Zip | Country |

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 95-3110002 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

| | |
|---|--------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|--------------------------------|

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name
CORPORATION SERVICE COMPANY
Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET
City
TALLAHASSEE FL Zip Code
32301

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. I am familiar with, and accept the obligations of registered agent.

Laura R. Dunlap
as its agent

SIGNATURE *Laura R. Dunlap*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/26/02

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP | V CLAPP, DAVID C 700 TECHNOLOGY PARK DR. BILLERICA MA 01821 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VGCS COSTANZA, NICHOLAS J 3033 SCIENCE PARK RD SAN DIEGO CA 92121 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/D PONTIUS, EARL A 700 TECHNOLOGY PARK DR. BILLERICA MA <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V PETTIGREW, JOHN E 3033 SCIENCE PARK RD SAN DIEGO CA 92121 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AT PETERSON, DEANNA H 3033 SCIENCE PARK RD SAN DIEGO CA 92121 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AT LECHIEN, SHAWN 3033 SCIENCE PARK RD SAN DIEGO CA 92121 <input checked="" type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Chairman/Director Gene W. Ray 3033 Science Park Road San Diego, Ca 92121 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director Eric M. DeMarco 3033 Science Park Road San Diego, CA 92121 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V.P., CFO and Treasurer Michael Paige 3033 Science Park Road San Diego, CA 92121 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 600007372256 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Secretary Cheryl L. Barr 3033 Science Park Road San Diego, CA 92121 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

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 *Cheryl L. Barr* SECRETARY REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-21-02

858-552-9500

CR2E034 (4/02)

Attachment

P17227

2082



ACCOUNT NO. : 072100000032

REFERENCE : 718111 4388080

AUTHORIZATION :

COST LIMIT : \$ 550.00

Patricia Pizutto

ORDER DATE : August 23, 2002

ORDER TIME : 11:26 AM

ORDER NO. : 718111-020

CUSTOMER NO: 4388080

CUSTOMER: Mr. Michael Kirker
The Titan Corporation
3033 Science Park Rd.

San Diego, CA 92121

CHANGE OF AGENT

NAME: HORIZONS TECHNOLOGY, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Maria Replogle

RECEIVED
02 AUG 27 PM 12:52
DIVISION OF CORPORATION