

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P21512**

1. Corporation Name

**METRIC MANAGEMENT, INC.**

Principal Place of Business

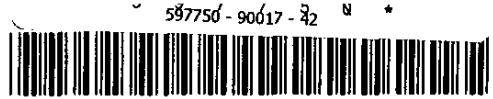
**1 CALIFORNIA STREET  
STE 1400  
SAN FRANCISCO CA 94111-5415  
US**

Mailing Address

**1 CALIFORNIA STREET  
STE 1400  
SAN FRANCISCO CA 94111-5415  
US**

**FILED**  
**Jul 28, 1999 8:00 am**  
**Secretary of State**

07-28-1999 90017 042 \*\*\*550.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/27/1988**

4. FEI Number

**94-3059943**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DVP** ☐ DELETE

NAME **HOWERTON, HERMAN H.**  
STREET ADDRESS **1 CALIFORNIA ST., STE 1400**  
CITY-ST-ZIP **SAN FRANCISCO CA 94111**

TITLE **VP** ☐ DELETE

NAME **MORRIS, JEFFREY J**  
STREET ADDRESS **1 CALIFORNIA ST., STE 1400**  
CITY-ST-ZIP **SAN FRANCISCO CA 94111**

TITLE **CCFT** ☐ DELETE

NAME **FINELLI, WILLIAM A**  
STREET ADDRESS **ONE NORTH BROADWAY #500**  
CITY-ST-ZIP **WHITE PLAINS NY 10601**

TITLE **AVP** ☐ DELETE

NAME **BAWDEN, LAMONT W.**  
STREET ADDRESS **8700 EAST VIA DE VENTURA, STE 170**  
CITY-ST-ZIP **SCOTTSDALE AZ**

TITLE **VPPM** ☒ DELETE

NAME **BEHYMER, ANDREW T**  
STREET ADDRESS **ONE NORTH BROADWAY STE 500**  
CITY-ST-ZIP **WHITE PLAINS NY 10601**

TITLE **D** ☐ DELETE

NAME **LYDON, THOMAS P JR**  
STREET ADDRESS **ONE NORTH BROADWAY #500**  
CITY-ST-ZIP **WHITE PLAINS NY 10601**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**SIGNATURE**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Herman H. Howerton**

**7/1/99**

**(415) 678-2000**

Date

Daytime Phone #

CR2E034 (5/99)

0121051