

FILE NOW: FILING FEE AFTER MAY 1 IS \$5500

FILED

Feb 03 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Moam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P22097** (0)  
1. Corporation Name  
**NETWORK SECURITY ACCEPTANCE CORPORATION**



Principal Place of Business  
**2340 E TRINITY MILLS RD  
STE 300  
CARROLLTON TX 75006  
US**

Mailing Address  
**2340 E TRINITY MILLS RD  
STE 300  
CARROLLTON TX 75006-1947  
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

3. Date Incorporated or Qualified

**11/28/1988**

3a. Date of Last Report

**01/23/1996**

4. FEI Number

**75-1865690**

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

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 a  
office or registered agent, or both, in the State of Florida. Such change was authorized  
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta  
es.

SIGNATURE

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

(NOTE: Registered

agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SPD  
PATTERSON, PENDIL T.  
2340 E TRINITY MILLS RD 300  
CARROLLTON TX**

☐ DELETE

1.1 T

1.2 N

1.3 S

1.4 C

2.1 T

2.2 N

2.3 S

2.4 C

3.1 T

3.2 N

3.3 S

3.4 C

4.1 T

4.2 N

4.3 S

4.4 C

5.1 T

5.2 N

5.3 S

5.4 C

6.1 T

6.2 N

6.3 S

6.4 C

☐ Change

☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-27-97 (972) 418-2950**

Date

Daytime Phone #

0484086

CR2E034 (9/96)