

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90045 036 ***150.00

DOCUMENT # P31010

1. Entity Name

GEAC ENTERPRISE SOLUTIONS, INC.

Principal Place of Business

**66 PERIMETER CENTER EAST
 ATLANTA GA 30346-1805**

Mailing Address

**120 TURNPIKE ROAD
 TAX DEPT
 SOUTHBOROUGH MA 01772-2104
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-3552561

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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	PCEO CALDWELL, JOHN E 4100 YONGE ST. N. YORK ONTARIO CANADA M2-P2G2	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PIPPY, THOMAS A 4100 YONGE ST. N. YORK ONTARIO CANADA M2-P2G2	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHELLEY R. ISENBERG 4100 YONGE ST. NORTH YORK ON	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SMITH, KATHRYN A. 120 TURNPIKE ROAD, TAX DEPT SOUTHBOROUGH MA 01772-2104	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NEEMAN, ELLEN 4100 YONGE ST N. YORK ONTARIO CANADA M2P- 2G2	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO Paul Birch 11 Allstate Pkwy MARKHAM Ontario Canada L3R 9T8	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARTHUR Gitajn 11 Allstate Pkwy MARKHAM Ontario Canada L3R 9T8	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11 Allstate Parkway MARKHAM Ontario Canada L3R 9T8	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kathryn A.S. Bombo	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director William G Nelson 11 Allstate Pkwy. MARKHAM Ontario Canada L3R 9T8	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kathryn A.S. Bombo
Asst. Treasurer

Date

4/3/02

508-871-6970

Daytime Phone #

CR2E034 (9/01)

Attachment
DOC # P31010/630264

Officers and Director
of
Geac Enterprise Solutions, Inc.

EIN: 13-3552561

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
William G. Nelson	Director	11 Allstate Parkway Markham Ontario Canada L3R 9T8
Paul Birch	President & Chief Executive Officer	11 Allstate Parkway Markham Ontario Canada L3R 9T8
Arthur Gitajn	Treasurer	11 Allstate Parkway Markham Ontario Canada L3R 9T8
Shelley R. Isenberg	Secretary	11 Allstate Parkway Markham Ontario Canada L3R 9T8
Keith Anderson	Assistant Treasurer	66 Perimeter Center East Atlanta, GA 30346
Cindy Davis	Assistant Secretary	66 Perimeter Center East Atlanta, GA 30346
Robin de Mercado	Assistant Secretary	11 Allstate Parkway Markham Ontario Canada L3R 9T8
Ruth Klein	Assistant Secretary	11 Allstate Parkway Markham Ontario Canada L3R 9T8
Kathryn A. S. Bomba	Assistant Treasurer	120 Turnpike Road Southborough, MA 01772-2104
W. Scott Swoish	Assistant Treasurer	66 Perimeter Center East Atlanta, GA 30346
John T. Trent	Assistant Secretary	66 Perimeter Center East Atlanta, GA 30346