

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P31484**

1. Entity Name

**MICROAGE COMPUTER CENTERS, INC.****FILED****May 31, 2000 8:00 am**  
**Secretary of State**

05-31-2000 90014 009 \*\*\*150.00

Principal Place of Business

Mailing Address

**2400 S MICROAGE WAY**  
**LEGAL DEPT MS #8**  
**TEMPE AZ 85282**  
**US****2400 S MICROAGE WAY**  
**LEGAL DEPT #MS#8**  
**TEMPE AZ 85282-1824**  
**US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**86-0464172**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional**  
**Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**Name  
**NRAI Services, Inc.**Street Address (P.O. Box Number is Not Acceptable)  
**526 East Park Avenue**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.

SIGNATURE

*Charles Badot Vice Pres.*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**4-20-00**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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS</b> <b>HALD, ALAN P.</b> <b>2400 S MICROAGE WAY</b> <b>TEMPE AZ 85282</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>MCKEEVER, JEFFREY</b> <b>2400 S MICROAGE WAY</b> <b>TEMPE AZ 85282</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>DANIEL, JAMES R.</b> <b>2400 S MICROAGE WAY</b> <b>TEMPE AZ 85282</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ATC</b> <b>STORCK, RAYMOND L.</b> <b>2400 S MICROAGE WAY</b> <b>TEMPE AZ 85282</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ASVC</b> <b>DOMAZ, JAMES H</b> <b>2400 S MICROAGE WAY</b> <b>TEMPE AZ</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Chief Executive Officer</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Also Vice President, Treas.</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP, Secretary/Corp.Counsel</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President.</b> <b>Christopher J. Koziol</b> <b>2400 South MicroAge Way</b> <b>Tempe, AZ 85282-1896</b>	<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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**James H. Domaz, VP, Secretary**

Date

**4-20-00**

Daytime Phone #

**480-366-2320**

CR2E034 (9/99)

P31484

102591

**MICROAGE COMPUTER CENTERS, INC.**

<b>Director</b>	<b>Date Appointed</b>	<b>Title</b>	<b>Officers</b>	<b>Date Appointed</b>
Jeffrey D. McKeever	03/26/87	Chairman of the Board	Jeffrey D. McKeever	11/15/79
		Chief Executive Officer		02/01/00
		President	Christopher J. Koziol	07/27/98
		Executive Vice President	John H. Andrews	12/14/98
		Vice President, Corporate Counsel	James H. Domaz	11/03/97
		Secretary		12/02/99
		Vice President, Corporate Development	David R. Posegate	04/30/98
		Vice President, Real Estate	Alan R. Lyons	06/23/98
		Vice President, Treasurer	Raymond L. Storck	2/16/2000
		Controller		10/01/91
		Assistant Secretary	Michele A. Hughes	12/02/99
		Assistant Treasurer	Prima L. Walker	12/02/99