

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90927 001 ***150.00

0578285 AT

DOCUMENT # P35659

1. Entity Name
AWI SYSTEMS MANAGEMENT, INC.

Principal Place of Business
10946 GOLDEN W DR
STE 100
HUNT VALLEY MD 21030
US

Mailing Address
10946 GOLDEN W DR
STE 100
HUNT VALLEY MD 21030
US



2. Principal Place of Business
144 Lakefront Drive
 Suite, Apt. #, etc.

3. Mailing Address
144 Lakefront Drive
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Hunt Valley MD
 Zip
21030
 Country
USA

City & State
Hunt Valley MD
 Zip
21030
 Country
USA

4. FEI Number
52-1658469

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

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 **P SOENEN, DON** ☐ Delete
 STREET ADDRESS **10946 GOLDEN WEST DRIVE**
 CITY-ST-ZIP **HUNT VALLEY MD 21030**

TITLE
 NAME **CFO HEYDT, T K** ☐ Delete
 STREET ADDRESS **10946 GOLDEN W DRIVE TE 100**
 CITY-ST-ZIP **HUNT VALLEY MD**

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **P SOENEN, DON** ☒ Change ☐ Addition
 STREET ADDRESS **144 Lakefront Drive**
 CITY-ST-ZIP **Hunt Valley MD 21030**

TITLE
 NAME **CFO Heydt, T. K.** ☒ Change ☐ Addition
 STREET ADDRESS **144 Lakefront Drive**
 CITY-ST-ZIP **Hunt Valley, MD 21030**

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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: **KATHY HEYDT CFO** 2/14/02 4102297500
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)