

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P92000010137

FILED
Mar 24, 2003
Secretary of State

Entity Name: CMS TECHNOLOGY SOLUTIONS, INC.

Current Principal Place of Business:

445 WEST DR.
MELBOURNE, FL 32904 US

New Principal Place of Business:

445 WEST DR.
SUITE 101
MELBOURNE, FL 32904 US

Current Mailing Address:

445 WEST DR.
MELBOURNE, FL 32904 US

New Mailing Address:

445 WEST DR.
SUITE 101
MELBOURNE, FL 32904 US

FEI Number: 59-3156665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAUSER, HOWARD W
445 WEST DR.
MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

HAUSER, HOWARD W
445 WEST DR.
SUITE 101
MELBOURNE, FL 32904 US

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: HOWARD W. HAUSER

03/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: HAUSER, HOWARD W
Address: 394 EAST DR
City-St-Zip: WEST MELBOURNE, FL 32904

Title: P () Delete
Name: BULL, ROBERT
Address: 394 EAST DR
City-St-Zip: WEST MELBOURNE, FL 32904

Title: S () Delete
Name: BONAVITO, JOHN S
Address: 394 EAST DR
City-St-Zip: MELBOURNE, FL 32924

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: HAUSER, HOWARD W
Address: 445 WEST DRIVE, SUITE 101
City-St-Zip: MELBOURNE, FL 32904

Title: P (X) Change () Addition
Name: BULL, ROBERT A
Address: 445 WEST DRIVE, SUITE 101
City-St-Zip: MELBOURNE, FL 32904

Title: S (X) Change () Addition
Name: BONAVITO, JOHN S
Address: 445 WEST DRIVE, SUITE 101
City-St-Zip: MELBOURNE, FL 32904

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A. BULL

P

03/24/2003

Electronic Signature of Signing Officer or Director

Date