

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 30, 1999 8:00 am  
Secretary of State

04-30-1999 90033 033 \*\*\*150.00

DOCUMENT # P93000062577

1. Corporation Name  
TENDASOFT, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1993

4. FEI Number

34-1754079

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 owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION FL 33324

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 above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CEO ☐ DELETE  
NAME DAFOE, KENNETH F  
STREET ADDRESS 10621 GREENVILLE ROAD  
CITY-ST-ZIP VAN WERT OH

TITLE ☐ DELETE  
NAME DAFOE, DEREK D  
STREET ADDRESS 1056 LINDEN DRIVE  
CITY-ST-ZIP VAN WERT OH

TITLE ☐ DELETE  
NAME DAFOE, HEATHER M  
STREET ADDRESS 10621 GREENVILLE ROAD  
CITY-ST-ZIP VAN WERT OH

TITLE ☐ DELETE  
NAME MARSEE, FRED  
STREET ADDRESS 5720 PAYNE ROAD  
CITY-ST-ZIP CONVOY OH

TITLE ☒ DELETE  
NAME GRIFFEN, DANA  
STREET ADDRESS 195 KENWICK DR  
CITY-ST-ZIP VAN WERT OH

TITLE ☐ DELETE  
NAME MCKENZIE, MICHAEL  
STREET ADDRESS 1040 JENNINGS ROAD  
CITY-ST-ZIP VAN WERT OH 45891

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☐ Addition  
1.2 NAME McCracken, George  
1.3 STREET ADDRESS 404 Linda St.  
1.4 CITY-ST-ZIP Van Wert, OH 45891

2.1 TITLE D ☐ Change ☐ Addition  
2.2 NAME Morris, Dr. Burl  
2.3 STREET ADDRESS 826 Fort Jennings Rd Box 364  
2.4 CITY-ST-ZIP Delphos, OH 45833

3.1 TITLE D ☐ Change ☐ Addition  
3.2 NAME Thatcher, Harvey  
3.3 STREET ADDRESS P.O. Box 32  
3.4 CITY-ST-ZIP Van Wert, OH 45891

4.1 TITLE V ☐ Change ☐ Addition  
4.2 NAME Blair DaFoe  
4.3 STREET ADDRESS 208 N. Jefferson  
4.4 CITY-ST-ZIP Van Wert, OH 45891

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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  
Derek DaFoe, President

Date

Daytime Phone #

CR2E034 (11/98)