

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P93000087050 (9)

1. Corporation Name

APPIAN SOFTWARE, INC.

Principal Place of Business

1462 VUAVA AVE
MELBOURNE FL 32935
US

Mailing Address

1462 GUAVA AVE
MELBOURNE FL 32935
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/15/1993

3a. Date of Last Report
04/20/1994

2. Principal Place of Business

21 **1462 GUAVA AVE**

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Zip Country

27 City & State

28 Zip Country

4. FEI Number
59-3225508

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BEGALA, MICHAEL F
7667 N WICKHAM RD
SUITE 120
MELBOURNE FL 32940

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
NAME
STREET ADDRESS
CITY ST ZIP
**D
BEGALA, MICHAEL F
7667 N WICKHAM RD SUITE 120
MELBOURNE FL 32940**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**D
DRAPER, WILLIAM
515 POINSETTIA RD
MELBOURNE BEACH FL 32951**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **President (P/C)** ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE **Vice President (VP)** ☒ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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.

SIGNATURE:

Michael F. Begala **Michael F Begala**

Date

June 1, 1995

Secretary's Office

0066

0018731 CP

CR2E034 (3/95)