FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P94000076802 (5) **DOCUMENT #**

ADAPTIVE DESIGN TECHNOLOGIES, INC.

Mailing Address Principal Place of Business P.O. BOX 5035 2255 GLADES ROAD **BOCA RATON FL** SUITE 421 WEST **BOCA RATON FL.**



3. Date Incorporated or Qualified

10/18/1994

3a. Date of Last Report

05/01/1995

		2a. Mailing Address			4. FEI Number		piled Foi	
Principal Place of Business		·····			65-0554168		No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Sa.75 Additional Fee Required			
		27			6. Election Campaign Financing S5.00 May B			May Be
City & State		City & State			Trust Fund Contribution		Added	
. <u></u>			Countr	y	8. This corporation has liability for	intangible ta	ax unders 1	99.032,
Zip 1	- Country			•	Florida Statutes	s [X]No		
	9, Name and Address of Curren		1231		10. Name and Address of New	Registered	Agent	
	9, Name and Address of Obiter		8	1 Name				
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301-2636				82 Street Address (P.O. Box Number is Not Acceptable)				
				3				
INDUMNOCE IE GEGOVE			8	4 City		r-i	85 Zip	Code
				1 1		<u> </u>		
or registered familiar with	d agent, or both, in the State of Floring, and accept the obligations of, Sect	tion 607.0505, Florida Statute	≫S.	rporation's boar	ation submits this statement for the p rd of directors. I hereby accept the ap dwnen renstating!	DATE		
	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO O	FICERS AN		AS IN 12 Addition
2.	Р	[] DELETE	1, 1 7/7	LE			Change	L] Addition
ITLE	LAKEY, RONALD G		1.2 NAM	AE Ì				
IAME	CARET, HUNALD G	CTE 401 W		EE1 ADDRESS				
STREET ADDRESS	2255 GLADES ROAD STE 421 W			r-S1-ZIP				
ITY-ST-ZIP	BOCA RATON FL 33431-083	DELETE	2 1 111				Change	Addition
ITLE	VP	LJ been	2 2 NA					
IAME	BECK, JAN S	A4 141		REET ADDRESS				
STREET ADDRESS	2255 GLADES ROAD STE 4	21 W						
CITY-ST-ZIP	BOCA RATON FL 33431-083	35 [7] DELETE	3.1 TI	Y-ST-ZIP			Change	Addition
TITLE	Τ	[] DELICIT	1					
NAME	OLBERT, ANN M	. 110	3 2 NA					
STREET ADDRESS	2255 GLADES RD. STE. 421	1 W		REET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33431			Y-S1-71F'			Change	Additio
TITLE	S	☐ DELETE	4 1 Ti					
NAME	LEVINE, STEVEN J		4.2 NA					
STREET ADDRESS	2255 GLADES RD STE. 421	IW		REET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33431			IY-SI-ZIP		··· ·	☐ Change	Additio
		DETEIR.	5 17				_ `	_
TITLE			52 N	AME				
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TITLF NAME				TREET ADDRESS				
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TITLE NAME STREET ADDRESS CITY-S1-ZIP		☐ DEL E I E		TY-ST-ZIP			☐ Change	Additi
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ OÉLÉIE	540	TY-ST-ZIP		<u></u>	☐ Change	Additi
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	54C 611 62N	TY-ST-ZIP			☐ Change	Additi
TITLE NAME STREET ADDRESS CITY- S1-ZIP TITLE NAME STREET ADDRESS		•	54C 611 62N 63S	TY-ST-ZIP ITLE AME TREET ACORESS	y for the exemption stated in Section Irate and that my signature shall have this report as required by Chapter 60	440.07/00/81		-

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VICE Pres. 4