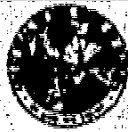


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 25 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000080724 (5)

1. Corporation Name

POLARIS SYSTEMS GROUP, INC.

Principal Place of Business

Mailing Address

11924 FOREST HILL BLVD.
SUITE 22-200
WEST PALM BEACH FL 33414

11924 FOREST HILL BLVD.
SUITE 22-200
WEST PALM BEACH FL 33414

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/03/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 13931 Geranium Place

26

4. FEI Number

65-0535216

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23 West Palm Beach, FL

28

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 33414

25 USA

29

30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KANE, EDWARD J
11924 FOREST HILL BLVD.
SUITE 22-200
WEST PALM BEACH FL 33414

81

Name Kane, Edward J

82

Street Address (P.O. Box Number is Not Acceptable) 13931 Geranium Place

83

84

City West Palm Beach

FL

85 Zip Code 33414

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

Edward J. Kane

Edward J. Kane

4-19-95

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	0
NAME	KANE, EDWARD J
STREET ADDRESS	11924 FOREST HILL BLVD., STE. 22-200
CITY - ST - ZIP	WEST PALM BEACH FL 33414
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	

1.1 TITLE	P/C/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kane, Edward J.	
1.3 STREET ADDRESS	13931 Geranium Place	
1.4 CITY - ST - ZIP	West Palm Beach, FL 33414	
2.1 TITLE	S/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Webb, Jr., Bryan W.	
2.3 STREET ADDRESS	509 Roundabout Dr.	
2.4 CITY - ST - ZIP	Trussville, AL 35173	
3.1 TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Carlisle, Richard A.	
3.3 STREET ADDRESS	2417 Bucknell Dr	
3.4 CITY - ST - ZIP	Valrico, FL 33594	
4.1 TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	White, Stephen I.	
4.3 STREET ADDRESS	100 Early Parkway	
4.4 CITY - ST - ZIP	Smyrna, GA 30088	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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)(4), 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 change in or on attachment with an address.

SIGNATURE:

Edward J. Kane

Edward J. Kane

4-19-95

407-791-2561

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #