

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P95000023450 (6)**

1. Corporation Name

**HARRIS COMPUTER SYSTEMS GROUP, INC.**



Principal Place of Business

**2101 WEST CYPRESS CREEK ROAD  
FT. LAUDERDALE FL 33309**

Mailing Address

**2101 WEST CYPRESS CREEK ROAD  
FT. LAUDERDALE FL 33309**

3. Date Incorporated or Qualified

**03/22/1995**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GARCIA, TERESITA H  
201 S. BISCAYNE BLVD., STE. 2000  
MIAMI FL 33131**

81 Name

**Daniel S. Dunleavy**

82 Street Address (P.O. Box Number is Not Acceptable)

**2101 West Cypress Creek Road**

83

84 City

**Ft. Lauderdale**

**FL**

85 Zip Code

**33309**

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 **Daniel S. Dunleavy**

(Signature of person authorized to register agent is not applicable)

(Signature of Registered Agent is required when registering)

**1/26/96**

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

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

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.1 TITLE

**P/T/S/D**

☐ Change ☒ Addition

1.2 NAME

**Daniel S. Dunleavy**

1.3 STREET ADDRESS

**2101 West Cypress Creek Road**

1.4 CITY- ST- ZIP

**Ft. Lauderdale, FL 33309**

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE:

**Daniel S. Dunleavy**

**Daniel S. Dunleavy**

**02/16/96**

Date

**954-974-1700**

Daytime Phone #

CR2E034 (12/95)