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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1006

SIGNATURE:

DIVISION OF CORPORATIONS

| 1330 | ************************************** | | | 1 | | | |
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| OCUMENT # P98 | 5000095299 (0) | | | | | | |
| SAGE TECHNOLOGIES, INC. | | | |) HORNIDAN KIR HAKDI OKIKI OTKIN DONIN | CONTRONS | | |
| | A | | | | | | |
| rincipal Place of Business | Mailing Address | | | | | | |
| 3501 IBIS DRIVE ORLANDO FL 32803 | 3501 IBIS DRIVE Orlando Fl 32803 | | | | | | |
| ONEMINE I'E SECON | 3.2.03 | | | 3. Date incorporated or Qualified 12/13/1995 | 3a. Date | of Last Re | port |
| . Principal Place of Business | 2a. Mailing Address | | | 4. FEI Number | | | pplied For |
|] | 26 | | | 59-3365444 | | | lot Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | Additional Required |
| City & Canto | City & State | | | 6. Election Campaign Financing | | \$5.00 |) May Be |
| City & State | 28 | | | Trust Fund Contribution | | Added | to Fees |
| Zip Country | Zip | Country | | B. This corporation has liability for Florida Statutes | intangible ta s X No | x under s | 199.032, |
| 25 | 29 of Current Registered Agent | 30 | | 10. Name and Address of New | | Agent | |
| g. Haine and Address | | 81 | Name | | | | |
| SIMPSON, TERRY C | | 82 | Street Addre | ess (P.O. Box Number is Not Accepta | tile) | | |
| 3501 IBIS DRIVE | | | | | | | |
| ORLANDO FL 32803 | | 83 | | | | | |
| | | ├ - | | | | 85 Zg | Code |
| | | 84 | City | | | | |
| Pursuant to the provisions of Sections or registered agent, or both, in the Sta | are of Fiorida. Silico coande was autoborze | | · | ation submits this statement for the pa d of directors. I hereby accept the app | FL urpose of cha pointment as | anging its registered | egistered offici agent. I am |
| or registered agent, or both, in the Sta familiar with, and accept the obligation | ate of Florida. Such change was authorized ns of, Section 607.0505, Florida Statutes. | | amed corpor oration's boar | if when redistating | urpose of cha pointment as | | |
| or registered agent, or both, in the Statamiliar with, and accept the obligation SIGNATURE. Signature, typed or printed name of re- | ate of Florida. Such change was authorized as of, Section 607.0505, Florida Statutes. Sestimed agent and life if applicable PNO1 ICERS AND DIRECTORS | s, the above-n id by the corpo IE. Bugstered Agent | amed corpor oration's boar | | urpose of cha pointment as DATE FICERS AND | DIRECTO | RS IN 12 |
| or registered agent, or both, in the Statamiliar with, and accept the obligation SIGNATURE Signature, typed or printed name of re- | ate of Florida. Such challinge was authorizens of, Section 607.0505, Florida Statutes. | s, the above nod by the corporate Registered Agent | amed corpor oration's boar t sunature require | is when revisitating. ADDITIONS/CHANGES TO OF | urpose of cha pointment as DATE FICERS AND | | |
| or registered agent, or both, in the Statemiliar with, and accept the obligation sIGNATURE. Signature, typed or printed name of recommendation. OFFI OFFI AMF | ate of Florida. Such change was authorized as of, Section 607.0505, Florida Statutes. Sestimed agent and life if applicable PNO1 ICERS AND DIRECTORS | s, the above nod by the corporate Registered Agent 13. 1.1 TITLE 12 NAME | amed corpor pration's boar t signature require | ADDITIONS/CHANGES TO OF | urpose of cha pointment as DATE FICERS AND | DIRECTO | RS IN 12 |
| or registered agent, or both, in the Stateminar with, and accept the obligation IGNATURE Signature, typed or printed name of re OFFI THE AME TREEL ADDRESS | ate of Florida. Such change was authorized as of, Section 607.0505, Florida Statutes. Sestimed agent and life if applicable PNO1 ICERS AND DIRECTORS | IE. Rugstered Agent 13. 1.1 TITLE 12 NAME 1.3 SIRRES | amed corpor pration's boar it signal are required | ADDITIONS/CHANGES TO OF | urpose of cha pointment as DATE FICERS AND | DIRECTO | RS IN 12 |
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Super Terry C. Simpson 4-23-96 407-896-1525