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May 01, 1999 8:00 am
Secretary of State

05-01-1999 90049 036 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000031254 (1)

1. Corporation Name

~~DADELAND SOFTWARE SERVICES, INC.~~

Colonial Software Services, Inc.

Principal Place of Business

Mailing Address

7545 N. KENDALL DR.
MIAMI FL 33156

7545 N. KENDALL DR.
MIAMI FL 33156



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1996

4. FEI Number

65-0707760

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 One Commerce St.

22 City & State

27 3rd Floor

23 Zip

Country

28 Zip

Country

24

25

29

30

U.S.

9. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
1600 MIAMI CENTER
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

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

1200 South Pine Island Rd.

83

84 City

Plantation

FL

85 Zip Code

33324

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 DPST ☒ DELETE
NAME RODRIGUEZ, CARLOS F
STREET ADDRESS 7545 N KENDALL DR
CITY-ST-ZIP MIAMI FL

TITLE President ☐ DELETE
NAME Davis, James W.
STREET ADDRESS One Commerce St.
CITY-ST-ZIP Montgomery AL 36104

TITLE Vice President ☐ DELETE
NAME Moore, Sarah H.
STREET ADDRESS One Commerce St.
CITY-ST-ZIP Montgomery AL 36104

TITLE Secretary ☐ DELETE
NAME McCreary, William A.
STREET ADDRESS One Commerce St.
CITY-ST-ZIP Montgomery AL 36104

TITLE Treasurer ☐ DELETE
NAME Moody, Sheila
STREET ADDRESS One Commerce St.
CITY-ST-ZIP Montgomery AL 36104

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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 vP Reimer, David
6.3 STREET ADDRESS One Commerce St.
6.4 CITY-ST-ZIP Montgomery AL 36104

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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:

SIGNATURE REQUIRED

04-28-99

(334) 240-5126

CR2E034 (10/97)