## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000033339 (8)

SUNBELT SOFTWARE, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 10 1997 8:00am Secretary of State



	CLUB COURT H GARDENS FL 33410	111 WINTER CLUB COURT PALM BEACH GARDENS FL 33410-4448								
						3. Date Incorporated or Qualified 3a. Date 04/12/1996			e of Last Report	
2. Principal	2a. Mailing Address	ng Address			4. FEI Number		<u> </u>	pplied For		
21 Suite, Ap	1 H ot	Suite, Apt. #, etc.			·····	65-0694605	22	<del></del>	ot Applicable	
22	( <b>*</b> , t)(t)	27 Suite, Apr. #, etc.				5. Certificate of Status Desired	XX.		Additional equired	
Cily & Sta 23		City & State	28			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Count	ry		8. This corporation has liability for i	intangible t		3. 199.032,	
24	25 25 9. Name and Address of Curr	29   rent Registered Agent	[30]			Florida Statutes  10. Name and Address of New Re				
Ri	CHARDSON, KEVIN F ESQ		E	1 Na	me					
CLYATT & RICHARDSON, P.A.				2 Str	eet Addre	ess (P.O. Box Number is Not Acceptab	ole)			
1551 FORUM PLACE - #300-C					OU FLOOR	and decrease in the second sec				
W	EST PALM BEACH FL 33401		8	3					-	
			]	4 Cit	•	oration submits this statement for the p	FL	'	Code	
agent I SIGNATURE	am familiar with, and accept the ob	ligations of, Section 607.0505, FI	orida Statu	es.		on's board of directors. I hereby acceptions to the second of directors.	DATE			
12.		AND DIRECTORS	13.	Saut eift.	INCOME TRESCUE	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITL		9			Change	Addition	
NAME	SCHREIBER, MARC C		1.2 NAM	E	[ ' '					
STHEET ADDRESS			1.3 STA	et addr	ESS					
CITY-S1-ZIP	PALM BEACH GARDENS FL			-ST-ZIP					( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
TITLE	D SCHREIBER, ERIC	DELETE	2.1 T)TU		1			Change	Addition	
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CITY - ST - ZIP	WEST PALM BEACH FL 334	109		1-\$T-ZIP						
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NAMÉ CADECA ADISSACA			62 NAN							
STREET ADDRESS	9			ET ADDR	122					
CrTY - ST - ZIP			5.4 CITY	ST-ZIP						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this arrural 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 of Statutes, and that my name appears in Block 12 or Block 13 of Statutes.

SIGNATURE: