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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000054413 (5)

1. Corporation Name

FIRST FINANCIAL SOFTWARE, INC.

Principal Place of Business

~~1665 SO. KIRKMAN ROAD STE 351~~
~~ORLANDO FL 32811~~

Mailing Address

~~1665 SO. KIRKMAN ROAD STE 351~~
~~ORLANDO FL 32811-2234~~



2. Principal Place of Business

21 ISO Semoran Commerce Pl.

Suite, Apt. #, etc.

22 105

City & State

23 Apopka, FL

Zip

24 32703

Country

25 USA

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

06/24/1996

3a. Date of Last Report

N/A

4. FEI Number

59-3319170

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

KARAGUESIAN, JACK
1665 SO. KIRKMAN ROAD STE 351
ORLANDO FL 32811

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Jack Karaguesian, Jack Karaguesian, Secretary

1/6/97

DATE

12. OFFICERS AND DIRECTORS

TITLE President
NAME Michael Martone
STREET ADDRESS 1620 Finley Ave.
CITY-ST-ZIP Apopka, FL 32703

TITLE Chief Executive Officer
NAME Ronald Kline
STREET ADDRESS 2541 Bay Leaf Drive
CITY-ST-ZIP Orlando, FL 32837

TITLE Treasurer/Secretary
NAME Jack Karaguesian
STREET ADDRESS 1665 S. Kirkman Rd. #351
CITY-ST-ZIP Orlando, FL 32811

TITLE Director
NAME James Fromi
STREET ADDRESS 9 Vole Ct.
CITY-ST-ZIP Moline, IL 61265

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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:

Jack Karaguesian

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/97

Date

407 889-2701

Daytime Phone

000061

CR2E034 (9/96)