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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000061134 (8)

**INSIGHT SOFTWARE CORPORATION** 

## **FILED** May 12 1997 8:00am Secretary of State



Principal Place of Business  109 NORTH ST. ANDREWS DRIVE ORMOND BEACH FL 32174			Mailing Address 109 NORTH ST. ANDREWS DRIVE ORMOND BEACH FL 32174-3840						
					·	3. Date Incorporated or Qualified 07/22/1996	3a. Dat	e of Las	st Report
2. Principal Place of Busin	oss	F:─-1	ing Address			4. FEI Number	}	1	Applied For
Suite, Apt #, etc.	<del></del>	26] Suite	, Apt. #, etc.			593394989	I <u>.                                 </u>	<b>\$9.7</b>	Not Applicable  5 Additional
22		27	, r q.c. n, o.o.			5. Certificate of Status Desired			Pequired
City & Stato			& State			6. Election Campaign Financing	···	\$5.0	00 May Be
23		28		<b></b>		Trust Fund Contribution		Aod	led to Fees
Xip	Country	Zip		Cour	itry	8. This corporation has liability for			er s. 199.032,
	25 and Address of Currer	29  nt Registered	Agani	30]		Florida Statutes  10. Name and Address of New Re	Yes [		
POLITO, LOUIS		it inglisiolou	Agorit		B1 Name	(t). Name and Address of New Ac	gistered A	gent	·
					00 00 00	(D.O. F). N			
109 NORTH ST. ANDREWS DRIVE ORMOND BEACH FL 32174					Street Add	dress (P.O. Box Number is Not Acceptal	Die)		
				Ţ	33		4		
				}	34 City		·	85 2	7ip Code
					,	orporation submits this statement for the pation's board of directors. I hereby acce	FL		`
12. TITLE D	OFFICERS AN	ID DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICE	CERS AND	DIREC1	TORS IN 12
	6146		☐ DELETE	1.1 111	E			Chan	nge 🔲 Addition
ADMAND	ih st. Andrews di	RIVE	[ □ D£ TF LE	1.2 NA 1.3 STI	AL EETI ADDRESS			Chan	ge Addition
STREET ADDRESS 109 NOR		RIVE	DETELE	1.2 NA 1.3 STI	ML EETI ADDRESS Y+S1+ZIP			Chan	
STREET ADDRESS CITY-ST-ZIP TITLE  109 NOR ORMOND	I'H ST. ANDREWS DI BEACH FL 32174	RIVE		1.2 NA 1.3 SH 1.4 CH	ML EET ADDRESS Y-ST-ZIP E				
STREET ADDRESS ORMOND TITLE DOWNOR	TH ST. ANDREWS DF BEACH FL 32174 ビミュウムト にむ	AA STORY		1.2 NA 1.3 SH 1.4 CH 2.1 TH 2.2 NA	ML EET ADDRESS Y-ST-ZIP E				
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Lam 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.