

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000096596

1. Entity Name
PRIMIS OF FLORIDA, INC.

FILED
Apr 14, 2000 8:00 am
Secretary of State
04-14-2000 90004 026 ***150.00

Principal Place of Business Mailing Address
100 COURTLAND STREET 600 COURTLAND STREET
SUITE 260 SUITE 260
ORLANDO FL 32804 ORLANDO FL 32804-1346



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		58-1878527		Not Applicable	
City & State		City & State		59-9557059			
Zip		Zip		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
Country		Country		<input type="checkbox"/>			
30022		USA					

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM		Name	
1200 S. PINE ISLAND RD.		Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324		City	
		FL Zip Code	

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SCHREINER, LESLIE		NAME		
STREET ADDRESS	11475 GREAT OAKS WAY, STE. 320		STREET ADDRESS		
CITY-ST-ZIP	ALPHARETTA GA		CITY-ST-ZIP		
TITLE	ST	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BRITAIN, WILLIAM B		NAME		
STREET ADDRESS	11475 GREAT OAKS WAY, STE. 320		STREET ADDRESS		
CITY-ST-ZIP	ALPHARETTA GA		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Leslie Schreiner **4/4/00**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

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Primis, Inc. - Board of Directors

Title	Chairman, President, and Chief Executive Officer	ADDITION	Title	Director	ADDITION
Name	C. James Schaper		Name	D.R. Grimes	
Street Address	11475 Great Oaks Way, Suite 320		Street Address	11475 Great Oaks Way, Suite 100	
City, State, & Zip	Alpharetta, GA 30022		City, State, & Zip	Alpharetta, GA 30022	
Title	Secretary, VP, and Chief Financial Officer	CHANGE	Title	Director	ADDITION
Name	Leslie H. Schreiner		Name	David Grissom	
Street Address	11475 Great Oaks Way, Suite 320		Street Address	400 West Market Street, Suite 2510	
City, State, & Zip	Alpharetta, GA 30022		City, State, & Zip	Louisville, KY 40202	
Title	Vice President	ADDITION	Title	Director	ADDITION
Name	Sander Abernathy		Name	Koleman Karleski	
Street Address	11475 Great Oaks Way, Suite 320		Street Address	1650 National City Tower	
City, State, & Zip	Alpharetta, GA 30022		City, State, & Zip	101 South Fifth Street	
				Louisville, KY 40202	
Title	Chief Legal Officer	ADDITION	Title	Director	ADDITION
Name	Connie C. Breese		Name	David Mahoney	
Street Address	11475 Great Oaks Way, Suite 320		Street Address	1 Canal Park	
City, State, & Zip	Alpharetta, GA 30022		City, State, & Zip	Cambridge, MA 02141	
Title	Director	ADDITION	Title	Director	ADDITION
Name	Don Burton		Name	Geoff Mott	
Street Address	614 West Bay Street		Street Address	1755 Embarcadero Road	
City, State, & Zip	Tampa, FL 33606-2704		City, State, & Zip	Palo Alto, CA 94303	
Title	Director	ADDITION	Title	Director	ADDITION
Name	Doug Cobb		Name	Jack Tyrrell	
Street Address	10401 Linn Station Road, Suite 200		Street Address	200 31st Avenue, N., Suite 200	
City, State, & Zip	Louisville, KY 40223		City, State, & Zip	Nashville, TN 37203	
Title	Director	ADDITION	Title	Director	ADDITION
Name	Alan Colner		Name	Michael E. Gelfert	
Street Address	1251 Avenue of the Americas, 53rd Floor		Street Address	122 E. 42nd Street, 49th Floor	
City, State, & Zip	New York, NY 10020		City, State, & Zip	New York, NY 10168-0130	