Apr 18, 2002 8:00 am & Secretary of State

04-18-2002 90335 008 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

P98000100812

DOCUMENT # 1. Entity Name

APPLIED COMPUTER TECHNIQUES, INC.

Principal Plac	ce of Busines	s	Mailing Address					
345 WIMBLEDON LANE		345 WIMBLEOON LANE						
NAPLES FL 34104-6599		NAPLES FL 34104-6599						
							1 1800 AND THE COLOR FOR A COLOR COLOR	
2. Principal Place of Business			3. Mailing Address		•	. (2016) 91 119 1910((21) 2011(2011(2013)) (31) 2011 4012 (21) (21) (21)		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
, ·			55.15) / po 11) 610.			CONOT MINE IN MICOLAGE		
City & State			City & State		4 . F	FEI Number NOT APPLICABLE Applied For		
		7.				Not Applicable		
Zip Country		Zip Countr		itry	5. 0	Certificate of Status Desired		
	6. Name	and Address of Current F	l Registered Agent	<u> </u>		7. N	Name and Address of New Registered Agent	
		-			Name			
JOHNSON, THEODORE A			Street		Street Addre	ddress (P.O. Box Number is Not Acceptable)		
345 WIMBLEDON LANE					- Circot Addit	Tool Addition (1.0. Box Notifice is Not Acceptable)		
NAPLES FL 34104-6599								
					City		FL Zip Code	
8. The above	named entit	y submits this statement for	the purpose of changing its	register	ed office or reg	gistered ag	ent, or both, in the State of Florida.	
0.0147.405								
SIGNATURE	Signature, typed	or printed name of registered agent a	nd title if apolicable. (NOT	E. Registere	d Agent signature re	quired when re	einstating) DATE	
9 This corpo	oration is elia	ible to satisfy its Intangible	FILE NOW!	!! FFF	IS \$150.00			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.			After May 1, 2002 Fee wil			00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. □ Added to Fees	
(See criteria on back)		Make Check Payable to Depa		epartment of	State	Added to 1 ees		
11.		OFFICERS AND I		12.		AD	DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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STREET ADDRESS		BLEDON LANE		STRE	ET ADORESS	•	•	
CITY-ST-ZIP	NAPLES I	FL 34104-6599		CITY	-ST-ZIP			
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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.

CITY-ST-ZIP

SIGNATURE: Vie 34