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 # S04873

(3)

AMERICAN SOFTWARE ENGINEERS, INC.

AMERICAN SOFTWARE ENGINEERS, INC.								
Principal Place of Business Mailing Address								
1108 NATURES JACKSONVILLE	MAMMOCK RD : FL 32259	1108 NATURES MAMMOCK RD JACKSONVILLE FL 32259						
						3. Date incorporated or Qualified 10/04/1990	3a. Date of La 05/01/19	
2. Principal P	lace of Business	2a, Mailing	Address			4. FEI Number 59-3031884		Applied For Not Applicabl
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	7	75 Additional ee Required
City & State	е	City & S	State			6. Election Campaign Financing	\$5	.00 May Be
Zip	Country	[28] Zip		Country		Trust Fund Contribution	• • • • • • • • • • • • • • • • • • • •	ded to Fees
24	25	29		30]			Yes No	der s. 199.032,
	9, Name and Address of Current	Registered Ag	jent	81	N	10. Name and Address of New Re	gistered Agent	
	KO, GEORGE JOSEPH			[81	Name			
	B NATURES HAMMOCK RD., S. KSONVILLE FL 32259			82 Street Ad		dress (P.O. Box Number is Not Acceptable)		
0.10	11001111000 10 00000			83				
				84	City		 85	Zip Code
							FL	
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, al Horida, Such	Florida Statut	es, the above	 named corp the corporat 	poration submits this statement for the patien's board of directors. I hereby accept	urpose of chang	ing its registered
agent I a	m familiar with, and accept the obliga	tions of Section	607.0505, Fir	orida Statutos	·	action bottle of directors. The loop dood,	, the appearance	it da regioteroa
SIGNATURE		da san san isan	70.151				a a series and a s	
12,	Signature: typed or printed name of registered ages OF FICERS AND		(NUI	13.	it signalure requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE SERS AND DIREC	TORS IN 12
TITLE	VSD	1	DELETE	1.1 THE	<u> </u>	ADDITIONS/OFFIANGES TO OFFIC	Cha	
NAME	WALKO, SANDRA			1.2 NAME				
STREET ADDRESS	1108 NATURES HAMMOCK RD			1.3 \$TREE1	ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			1.4 C(1Y - S)	- ZIP			
TITLE	PTD	DELETE		21111111			Cha	nge 🔲 Addilio
NAME	WALKO, GEORGE JOSEPH			2.2 NAME				
STREET ADDRESS	1108 NATURES HAMMOCK RD	,		2.3 STREET.	ADDRESS			
CITY - ST - ZIP	JACKSONVILLE FL			2. 4 CHY - S	1 - ZII ^r			
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NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET.	ADDRESS			
CITY-ST-ZIP			— 651 535 —————————————————————————————————	3.4 CITY · S	T-ZIP			F=1
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NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET.	ì			
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TITLE		l	☐ DECETE	5.11016			☐ Cha	nge 🔲 Addilio
NAME				5.2 NAME	*DDDEGE			
STREET ADDRESS				5.3 STREET.				
CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·	DÉLÉTE	5.4 CITY - ST 6.1 TITLE	: 4P'		Cha	nge 🔲 Addition
NAME		L					0118	ingo LI Addillul
				6.2 NAME	ADDDEEC			
STREET ADDRESS CITY-ST-ZIP				6.3 STREET 6.4 CITY: ST				

14. 1 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 eath; 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.

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And ann ...

FILED

Mar 17 1997 8:00am

Secretary of State