

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90150 042 ***150.00

DOCUMENT # S32359

1. Entity Name

STATEWIDE DATA SERVICES, INC.

Principal Place of Business

7 N. BAYLEN STREET
PENSACOLA FL 32504-6667
32501

Mailing Address

1000 ALDERMAN DR
ALPHARETTA GA 30005

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3055072

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

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

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

Signature, typed or printed name of registered agent and title if applicable.

(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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **AS** ☐ Delete
NAME **YOUNG, MARY M**
STREET ADDRESS **1290 OLD WOODBINE RD**
CITY-ST-ZIP **ATLANTA GA 30319**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **SMITH, DEREK**
STREET ADDRESS **15120 N. VALLEYFIELD RD**
CITY-ST-ZIP **ALPHARETTA GA 30004***

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **LEE, DAVID T**
STREET ADDRESS **1000 ALDERMAN DR**
CITY-ST-ZIP **ALPHARETTA GA 30005**

TITLE **Executive Vice President** ☒ Change ☐ Addition
NAME **David T. Lee**
STREET ADDRESS **649 Lakeshore Dr.**
CITY-ST-ZIP **Duluth, GA 30096**

TITLE **TD** ☐ Delete
NAME **CURLING, DOUGLAS C**
STREET ADDRESS **330 LOG HOUSE CRT**
CITY-ST-ZIP **ROSWELL GA 30075**

TITLE **Chief Operating Officer/Director** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **DE JONES, J. MICHAEL**
STREET ADDRESS **4588 HOISTEIN HILL**
CITY-ST-ZIP **NORCROSS GA 30092**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☒ Delete
NAME **MILLIGAN, MIKE**
STREET ADDRESS **100 ALDERMAN DR**
CITY-ST-ZIP **ALPHARETTA GA 30005**

TITLE **Treasurer** ☐ Change ☒ Addition
NAME **David E. Trinc**
STREET ADDRESS **4326 Cedar Wood Drive**
CITY-ST-ZIP **Kilburn, GA 30047**

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: *[Signature]* **J. Michael de Jones** 4/25/02 (770) 752-6005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

STATEWIDE DATA SERVICES, INC.

1000 ALDERMAN DRIVE
ALPHARETTA, GA 30005

OFFICERS

TITLE/POSITION	NAME	RESIDENTIAL ADDRESS
CHAIRMAN, PRESIDENT & CEO	DEREK V. SMITH	15120 NORTH VALLEYFIELD ROAD, ALPHARETTA, GA 30004
CHIEF OPERATING OFFICER	DOUGLAS C. CURLING	330 LOG HOUSE COURT, ROSWELL, GA 30075
EXECUTIVE VICE PRESIDENT	DAVID T. LEE	649 LAKESHORE DR, DULUTH, GA 30096
SECRETARY & GENERAL COUNSEL	J. MICHAEL DE JANES	4588 HOLSTEIN HILL, NORCROSS, GA 30092
CHIEF FINANCIAL OFFICER	MICHAEL S. WOOD	120 BAY POINTE TERRACE ALPHARETTA, GA 30005
TREASURER	DAVID E. TRINE	4326 CEDAR WOOD DRIVE LILBURN, GA 30047
ASST. SECRETARY	MARY M. YOUNG	1290 OLD WOODBINE ROAD, ATLANTA, GA 30319

DIRECTORS

NAME	RESIDENTIAL ADDRESS
J. MICHAEL DE JANES	4588 HOLSTEIN HILL, NORCROSS, GA 30092
DEREK V. SMITH	15120 NORTH VALLEYFIELD ROAD, ALPHARETTA, GA 30004
DOUGLAS C. CURLING	330 LOG HOUSE COURT, ROSWELL, GA 30075

Attachment

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