## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE **Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

1999

SIGNATURE:

DOCUMENT # S95079

1. Corporation Name
DACUS SOFTWARE CORP

**FILED** Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90016 029 \*\*\*158.75

Principal Place	e of Business	Mailing Address					
7203 NW 444 St							
Coral Springs, FL 3306			5	DO NOT WRITE IN THIS SPACE			
54.142s, PC 23083					3. Date Incorporated or Qualifed		
2. Principal P	2. Principal Place of Business 2a. Malling Address				4. FEI Number	⇒ Ar	oplied For
21					65-029615		ot Applicable
Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Addi		II.	
27							equired
City & State		⊢ <sup></sup> ′	¬ ··· ′		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		•
Zip			Country		8. This corporation owes the current year		. 1
24	25 29 30		10		Personal Property Tax.	· 🗌 Yes	No.
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent	7
G. M. K	2 A Dague		81	Name			
GARY A. DACUS			82	82 Street Address (P.O. Box Number is Not Acceptable)			
720	o3 んん 445.	S#					
	15000	ビィット・イイ	83				
C01	al offerings.	FL 33069	<b>3</b> 84	City		85 Zip (	Code
44 5	, , , , , , , , , , , , , , , , , , , ,				Forestion submits this statement for the purpose		registered
office or re	egistered agent, or both, in the State of	f Florida. Such change was autl	horized by	the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as re	gistered
agent. I ai	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statutes	<b>5.</b>			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: B	lenistered Ane	nt signature required	d when reinstating) DATE		
12.	• OFFICERS AND		13.	in signatore required	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12
TITLE	President	☐ DELETE	1.1 TITLE			Change	DRS IN 12
NAME	GARY A. DAC.	uS.	1.2 NAME				
STREET ADDRESS	7203 NW 44进 St 135		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	Coral Springs FL 33065 140		1.4 CITY-S	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	-		2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
_CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE	☐ DELETE		3.1 TITLE			Change	Addition
NAME			3.2 NAME				{
STREET ADDRESS				TADORESS			1
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP		☐ Change	Addition
TITLE		☐ ΩCTEIC	4.1 TITLE				
NAME STREET ADDRESS			4, 2 NAME	TADDDECO			
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S 5.1 TITLE	1-211		Change	Addition
NAME			5.2 NAME				_
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE		<del></del>	☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	TADORESS			
CITY-ST-ZIP			6.4 CITY-S	T-ZIP			
14. I hereby c	ertify that the information supplied with	this filing does not qualify for the	he exempt	ion stated in S	ection 119.07(3)(i), Florida Statutes. I further of	ertify that the i	nformation
officer or of Block 12 of	on this annual report or supplemental a director of the corporation or the receiv or Block 13 if changed for on an attachi	innual report is true and accura er or trustee empowered to exe ment with an addiess, with all o	ne and tha cute this r ther like er	t my signature eport as requir mpowered.	shall have the same legal effect as if made un red by Chapter 607, Florida Statutes; and that	my name appe	an an ears in