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

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

| ANN  | Secretary of State  DIVISION OF CORPORATIONS   |   | Secretary of State  |  |  |
|--|--|---|---|--|--|
|  | MENT # V30313<br>CENTURY SOFTWARE, INC.  | 3 (3)   |   |  |  |
|  |  |   |   |  |  |
| Principal Plac   | e of Business  | Mailing Address   |   | T CERTY BY LEAN LYNNY BRIDD NIVEY NAMED WIN DIRIN  | \$1811 61811 £1811 \$1811 \$1811 11\$1   |
|  |  | 1100 5TH AVE SOUTH  |   |  |  |
| Suite 308<br>Naples FL 33940   |  | SUITE 308<br>Naples Fl 33940  |   | DO NOT WRITE IN T  | HIS SPACE  |
| US   | •  | US  |   | 3. Date Incorporated or Qualified  |  |
| 2 Principal P  | Place of Business  | 2a. Mailing Address   |   | 04/16/1992<br>4. FEI Number  |  |
| 21   | IQUE OF DUSTIFESS  | 26. Mailing Address   |   | 65-0330122   | Applied For<br>Not Applicable  |
| Suite, Apt.  | #, etc.  | Suite, Apt. #, etc.   |   |  | \$8.75 Additional  |
| 22   |  | 27  |   | 5. Certificate of Status Desired   | Fee Required   |
| City & State   | θ  | City & State  |   | 6. Election Campaign Financing   | \$5.00 May Be  |
| Zip  | Country  |   | Country   | Trust Fund Contribution  8. This corporation owes or has paid the  | Added to Fees  |
| 24   | 25   | <b>⊢</b> •  | 30  | Personal Property Tax due June 30.   | Yes No   |
|  | 9. Name and Address of Current   | Registered Agent  |   | 10. Name and Address of New Registe  | red Agent  |
|  | MPBELL, STEPHEN R.   |   | 81 Name   |  |  |
| 5761 CYPRESS HOLLOW WAY  |  |   | 82 Street Ad  | dress (P.O. Box Number is Not Acceptable)  | <del></del>  |
| NA.  | PLES FL 33942  |   | 63  |  |  |
|  |  |   |   |  |  |
|  |  |   | 84 City   | ı  | Zip Code   |
| 11. Pursuant to office or reagent. I as  | to the provisions of Sections 607.0502<br>egistered agent, or both, in the State on<br>familiar with, and accept the obligat   | and 607,1508, Florida Statute<br>of Florida. Such change was a<br>tions of, Section 607,0505, Flo                                 | es, the above-named co<br>uthorized by the corpor<br>rida Statutes.               | rporation submits this statement for the purpos<br>ation's board of directors. I hereby accept the   | se of changing its registered appointment as registered                              |
| SIGNATURE  | Signature typed or printed name of registered agent  | t and title if anglicable (NOTE   | : Registered Agent signature req  | juired when reinstating) DA  | T.C.   |
| 12.  | OFFICERS AND   |   | 13.   | ADDITIONS/CHANGES TO OFFICERS  |  |
| TITLE  | D  | DELETE  | 1.1 TITLE   |  | ☐ Change ☐ Addition  |
| NAME   | CAMPBELL, STEPHEN R.   |   | 1.2 NAME  |  |  |
| STREET ADDRESS   | 5761 CYPRESS HOLLOW WAY NAPLES FL  | ,   | 1.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP<br>TITLE   | narieo fi<br>D   | ☐ DELETE  | 1.4 CITY-ST-ZIP<br>2.1 TITLE  |  | Change Addition  |
| NAME   | DEMPSEY, STEPHEN J   |   | 22 NAME   |  | C Change C Racillon  |
| STREET ADDRESS   | 5761 CYPRESS HOLLOW WAY  | •   | 2.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP  | NAPLES FL  |   | 2. 4 CITY - ST - ZIP  |  |  |
| TITLE  |  | ☐ DELETE  | 3.1 TITLE   |  | Change Addition  |
| NAME<br>ATREET ADDRESS   |  |   | 3.2 NAME  |  |  |
| STREET ADDRESS<br>CITY-ST-ZIP  |  |   | 3.3 STREET ADORESS  |  |  |
| TITLE  |  | DELETE  | 3.4. CITY-ST-ZIP<br>4.1 TITLE   |  | Change Addition  |
| NAME   |  |   | 4. 2 NAME   |  |  |
| STREET ADDRESS   |  |   | 4.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP  |  |   | 4.4 CITY - ST - ZIP   |  |  |
| TITLE  |  | DELET <b>Ē</b>  | 5.1 TITLE   |  | Change Addition  |
| NAME<br>STREET ADDRESS   |  |   | 5.2 NAME  |  |  |
| CITY-ST-ZIP  |  |   | 5.3 STREET ADDRESS<br>5.4 CITY - ST - ZIP   |  |  |
| TITLE  |  | DELETE  | 6.1 TITLE   |  | Change Addition  |
| NAME   |  |   | 6.2 NAME  |  | _ · _  |
| STREET ADDRESS   |  | . /   | 6.3 STREET ADDRESS  |  |  |
| CITY-ST-ZIP  | and the state of t | $\sim$  | 5.4 CrTY-ST-ZIP   |  |  |
| indicated of officer or officer of the Block 12 of the Block 1 | ertry that the information supplied with<br>on this annual report or supplemental a<br>director of the corporation or the receiv<br>or Block 13 if changed, or on ag atjach  | i triis tiling does not quality for<br>annual report is true and accu<br>/er or trustee emplowered to e:<br>iment with an audress | ting exemption stated in<br>trate and that my signat<br>xecute this report as rec | n Section 119.07(3)(i), Florida Statutes. I furthe<br>ure shall have the same legal effect as if made<br>quired by Chapter 607, Florida Statutes; and th | r certify that the information<br>under oath; that I am an<br>lat my name appears in |

1-27-98

**FILED** 

Mar 04 1998 8:00am