

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90056 015 ***150.00

DOCUMENT # **V38669**

1. Corporation Name

SYSTEM ONE TECHNICAL, INC.

Principal Place of Business

**4902 EISENHOWER BLVD
SUITE 370
TAMPA FL 33634**

Mailing Address

**4902 EISENHOWER BLVD
SUITE 370
TAMPA FL 33634**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/26/1992

4. FEI Number

59-3133490

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEST, JOHN B
4902 EISENHOWER BLVD
SUITE 370
TAMPA FL 33634**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **WEST, JOHN B**
STREET ADDRESS **4902 EISENHOWER BLVD**
CITY-ST-ZIP **TAMPA FL**

TITLE **PC** ☐ DELETE
NAME **WEST, JOHN B**
STREET ADDRESS **4902 EISENHOWER BLVD SUITE #370**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE **COC** ☐ DELETE
NAME **WHITTINGTON, MARK D**
STREET ADDRESS **4902 EISENHOWER BLVD SUITE #370**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE **CFO** ☐ DELETE
NAME **FREEMAN, WILLIAM T**
STREET ADDRESS **4902 EISENHOWER BLVD SUITE #370**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE ☐ DELETE
NAME **List Attached**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas W. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/99
Date

813-249-1757
Daytime Phone #

CR2E034 (11/98)

247638-40056-15
V38669

SYSTEM ONE TECHNICAL, INC.
DIRECTORS AND OFFICERS
10/11/98

NAME	SSN	TITLE	HOME ADDRESS	OUTSIDE BUSINESS AFFILIATION	BUSINESS ADDRESS	DIRECTOR	OFFICER	LAST DATE APPOINTED AS OFFICER
JOHN B. WEST	125-50-2659	CHAIRMAN, C.E.O. AND PRESIDENT	16408 MILLAN DE AVILA, TAMPA, FL 33613	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634	X	X	8/4/92
MARK D. WHITTINGTON	261-61-3111	CHIEF OPERATING OFFICER/VICE PRESIDENT	2505 WATROUS AVENUE, TAMPA, FL 33629	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634	X	X	1/1/95
WILLIAM T. FREEMAN	402-84-1221	CHIEF FINANCIAL OFFICER/TREASURER	4914 LYFORD CAY ROAD TAMPA, FL 33629	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634	X	X	12/1/97
DAVID P. BURKE	274-56-3909	SECRETARY	15907 DOVER CLIFFE DRIVE LUTZ, FL 33549	CARLTON FIELDS PARTNER	PO BOX 3239 TAMPA, FL 33601		X	5/22/96
PEG L. BUCHENROTH	268-60-2837	ASSISTANT SECRETARY	8720 IMPERIAL COURT TAMPA, FL 33635	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634		X	1/27/95
BYRON L. WEST	174-54-1922	V.P. WESTERN REGION	35 BORMIO COURT DANVILLE, CA 94526	NONE	1000 MARINA BLVD, SUITE 550, BRISBANE, CA 94005		X	1/1/94
JOHN C. RUDDER	005-58-5245	V.P. MID-ATLANTIC REGION	1603 HUNT MEADOW DR ANNAPOLIS, MD 21403	NONE	7272 PARK CIRCLE CNTR, STE 190 HANOVER, MD 21076		X	2/1/96
JOSEPH R. VICENTE	272-46-9637	V.P. MAJOR ACCOUNTS	4613 OLD SAYBROOK AVE TAMPA, FL 33624	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634		X	2/1/96
BRUNA C. GIAMMARCO	372-74-1244	V.P. SOUTHERN REGION	4820 SAN JOSE TAMPA, FL 33629	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634		X	8/4/97
THOMAS W. GUARD	474-56-8618	ASSISTANT TREASURER	9406 AZALEA RIDGE CIRCLE TAMPA, FL 33647	NONE	4902 EISENHOWER BLVD, STE 370 TAMPA, FL 33634		X	7/16/98