

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V50398

1. Entity Name

ANSWER COMPUTER ASSOCIATES, INC.

Principal Place of Business

4143 BURNS RD

#44

PALM BEACH GARDENS FL 33410

Mailing Address

4143 BURNS RD

#44

PALM BEACH GARDENS FL 33410

2. Principal Place of Business

6250 N. MILITARY TRAIL

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Zip

Country

33407

USA

6. Name and Address of Current Registered Agent

ONEILL, T H

4143 BURNS RD

PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name

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

6250 N. MILITARY TRAIL #101

City

W. PALM BEACH

FL

Zip Code

33407

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, 2001 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

TITLE VP ☐ Delete

NAME NOBLE, NEIL F

STREET ADDRESS 4143 BURNS RD. # 44

CITY-ST-ZIP WEST PALM BEACH FL 33410

TITLE D ☐ Delete

NAME O'NEILL, TERENCE H.

STREET ADDRESS 4143 BURNS RD. #44

CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☒ Change ☐ Addition

NAME NOBLE, NEIL F

STREET ADDRESS 6250 N. MILITARY TRAIL, #101

CITY-ST-ZIP W. PALM BEACH, FL 33407

TITLE PRESIDENT ☒ Change ☐ Addition

NAME TERENCE H. O'NEILL

STREET ADDRESS 6250 N. MILITARY TRAIL #101

CITY-ST-ZIP W. PALM BEACH, FL 33407

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
May 12, 2001 8:00 am  
Secretary of State

05-12-2001 90048 028 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)