

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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90194 018 ***150.00

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PROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # F96000006542

1. Corporation Name
NETSOLVE, INCORPORATED



Principal Place of Business
**12331 RIATA TRACE PKWY
 AUSTIN TX 78727
 US**

Mailing Address
**12331 RIATA TRACE PKWY
 AUSTIN TX 78727
 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/13/1996

4. FEI Number
75-2094811

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.
 22 City & State
 23 Zip Country
 24 25

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country
 29 30

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	TYSDAL, CRAIG S.	
STREET ADDRESS	21 CICERO LN	
CITY-ST-ZIP	AUSTIN TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ADAMS, JOEL P	
STREET ADDRESS	518 BROAD ST	
CITY-ST-ZIP	SEWICKLEY PA 15143	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GULLARD, J MICHAEL	
STREET ADDRESS	1 1ST ST #9	
CITY-ST-ZIP	LOS ALTOS CA 94022	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KRAMLICH, C RICHARD	
STREET ADDRESS	235 MONTGOMERY ST #1025 RUSS BLDG	
CITY-ST-ZIP	SAN FRANCISCO CA 94101	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCCARTHY, JOHN S	
STREET ADDRESS	8000 MARYLAND AVE #1190	
CITY-ST-ZIP	ST LOUIS MO 63105	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MURPHY, H LELAND	
STREET ADDRESS	14457 GILLIS	
CITY-ST-ZIP	DALLAS TX 75244	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	See Attached
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
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: _____ **FILED** Date: _____ Daytime Phone #: **512/340-3000**

CR2E034 (11/98)

535500-90194-18
 #F96000006542

NETSOLVE, INCORPORATED

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OFFICERS NAME	TITLE	STREET ADDRESS	CITY	STATE	ZIP
Craig S. Tysdal	President & Chief Executive Officer	21 Cicero Lane	Austin	TX	78746
Kenneth C. Kieley	VP of Finance, Secretary & Chief Financial Officer	5207 Rain Creek Pkwy	Austin	TX	78759
Robert Pojman	VP of Operations	3103 Hayden Band	Austin	TX	78733
Chris Buffum	VP of Sales	12331 Riata Trace Pkwy	Austin	TX	78727
Michael R. Turner	VP of Marketing	9104 Deer Shadow Pass	Austin	TX	78733
Terrence Cheng	VP of Software Development	8514 Sweet Cherry Drive	Austin	TX	78750

DIRECTORS NAME	STREET ADDRESS	CITY	STATE	ZIP
Joel P. Adams	518 Broad Street	Sewickley	PA	15143
J. Michael Gullard	325 Distal Circle, Suite 100	Los Altos	CA	94022
C. Richard Kramlich	2490 Sand Hill Road	Menlo Park	CA	94025
John S. McCarthy	8000 Maryland Ave St 1190	St. Louis	MO	63105
H. Leland Murphy	14305 Inwood Road, #101-44	Dallas	TX	75244
Craig S. Tysdal	21 Cicero Lane	Austin	TX	78746
Howard D. Wolfe	1119 St. Paul St.	Baltimore	MD	21202
Suzanne Narducci	170 West Tasman Drive	San Jose	CA	95134