

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90063 014 ***150.00

DOCUMENT # F97000001402

1. Entity Name

OBJECTIVE SYSTEMS INTEGRATORS, INC.

Principal Place of Business

100 BLUE RAVINE ROAD
 FOLSOM CA 95630

Mailing Address

100 BLUE RAVINE ROAD
 FOLSOM CA 95630-4717

2. Principal Place of Business

101 PARK WAY

Suite, Apt. #, etc.

3. Mailing Address

101 PARK WAY

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FOLSOM, CA

City & State

FOLSOM, CA

4. FEI Number

68-0239619

Applied For

Not Applicable

Zip

95630

Country

USA

Zip

95630

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

Name

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

City

FL

Zip Code

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	VENTO, RICHARD G	
STREET ADDRESS	100 BLUE RAVINE RD	
CITY-ST-ZIP	FOLSOM CA 95630	
TITLE	V	<input type="checkbox"/> Delete
NAME	CARDMAN, PHILLIP N	
STREET ADDRESS	100 BLUE RAVINE RD	
CITY-ST-ZIP	FOLSOM CA	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	ALLEN, DAVE	
STREET ADDRESS	100 BLUE RAVINE RD	
CITY-ST-ZIP	FOLSOM CA	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	GERMAK, A J	
STREET ADDRESS	100 BLUE RAVINE RD	
CITY-ST-ZIP	FOLSOM CA	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	SEBRING, TIM	
STREET ADDRESS	100 BLUE RAVINE RD	
CITY-ST-ZIP	FOLSOM CA	
TITLE	CD	<input type="checkbox"/> Delete
NAME	JOHNSON, TOM L	
STREET ADDRESS	856 TAHOE BLVD SUITE 203	
CITY-ST-ZIP	INCLINE NV	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	101 PARK WAY	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	101 PARK WAY	
CITY-ST-ZIP		
TITLE	VP FINANCE and CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARRY FIORE	
STREET ADDRESS	101 PARK WAY	
CITY-ST-ZIP	FOLSOM, CA 95630	
TITLE	MANAGING ATTORNEY / ASST SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EYEG BRELSPORD	
STREET ADDRESS	101 PARK WAY	
CITY-ST-ZIP	FOLSOM, CA 95630	
TITLE	VP, Worldwide Sales	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dan D. Line	
STREET ADDRESS	101 Park Way	
CITY-ST-ZIP	FOLSOM, CA 95630	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Stanford Orntel, Brandon Orntel*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/03/2000 (916) 353-2400
 Date Daytime Phone #

CR2E034 (9/99)