2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004032

Entity Name: SABER SOFTWARE, INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1800 SW FIRST AVENUE SUITE 350 PORTLAND, OR 97201

Current Mailing Address: New Mailing Address:

1800 SW FIRST AVENUE SUITE 350 PORTLAND, OR 97201

in the State of Florida.

FEI Number: 36-4172737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: AMY GUDGEL 01/04/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: COO (X) Change () Addition KLEIN, JASON Name: Name: KHANNA, KARAN 2500 SAND HILL ROAD #100 1800 SW FIRST AVE. SUITE 350 Address: Address: City-St-Zip: MENLO PARK, CA 94025 City-St-Zip: PORTLAND, OR 97201 US

Title: PCOO () Delete Title: CEO (X) Change () Addition Name: KHANNA, KARAN Name: KHANNA, NITIN

Address: 1800 SW FIRST AVENUE #350 Address: 1800 SW FIRST AVE. SUITE 350
City-St-Zip: PORTLAND, OR 97201 City-St-Zip: PORTLAND, OR 97201 US

Title: T () Delete Title: CS (X) Change () Addition Name: KHANNA, KARAN Name: ZOLLINGER, JAY

 Address:
 1800 SW FIRST AVENUE #350
 Address:
 1800 SW FIRST AVE. SUITE 350

 City-St-Zip:
 PORTLAND, OR 97201
 City-St-Zip:
 PORTLAND, OR 97201 US

Title: S () Delete Title: CFO (X) Change () Addition
Name: ZOLLINGER, JAY Name: KEEFE, SHARON
Address: 1800 SW FIRST AVENUE #350 Address: 1800 SW FIRST AVE. SUITE 350

City-St-Zip: PORTLAND, OR 97201 City-St-Zip: PORTLAND, OR 97201 US

Title: CFO () Delete Title: DIRE (X) Change () Addition Name: KEEFE, SHARON Name: EAZOR, JOE

Address: 1800 SW FIRST AVENUE #350 Address: 5400 LEGACY DRIVE H3-5C-36

Address: 1800 SW FIRST AVENUE #350 Address: 5400 LEGACY DRIVE H3-5C-30 City-St-Zip: PCRTLAND, OR 97201 City-St-Zip: PLANO, TX 85024 US

Title: D () Delete Title: DIRE (X) Change () Addition Name: BISCONTI, BEN Name: ANDERSON, BARBARA

Address: 2500 SAND HILL ROAD #100 Address: 5400 LEGACY DRIVE H3-5C-36

City-St-Zip: MENLO PARK, CA 94025 City-St-Zip: PLANO, TX 85024

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAY ZOLLINGER CS 01/04/2008