2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # S96668

1. Entity Name TELETEK SOFTWARE, INC.

Principal Place of Business 3405 NW 97TH BLVD

BLDG. A-200 GAINESVILLE, FL 32606 US

SIGNATURE:

Mailing Address

3405 NW 97TH BLVD BLDG. A-200

GAINESVILLE, FL 32606 US

FILED May 02, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 04302007

| 5. | Certificate of Status Desired | \$8.75 | Additional |
|----|-------------------------------|--------|----------------|
| | 59-3093939 | | Not Applicable |
| 4. | FEI Number | Į. | Applied For |

Fee Required

352-331*-0100*

Davime Phone #

6. Name and Address of Current Registered Agent DAVIS, LON R 14213 NW 29TH AVE. GAINESVILLE, FL 32607

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DO NOT WRITE IN THIS SPACE

| 8. The above the obligat | named entity submits this statement for the plions of registered agent. | urpose of changing its registered | d office or r | egistered agent, or bo | oth, in the State of Florida. I am familiar with, and accept |
|---|---|---|--|--|--|
| SIGNATURE | Signature, typed or printed name of registered agent and title | f applicable (NOTE: Registered | Agent signature | e required when reinstating) | DATE |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | 9. Election Campaign Financing | | | |
| 10. | OFFICERS AND DIREC | TORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P DAVIS, LON R 14213 NW 29TH AVE. GAINESVILLE, FL 32607 | | | | |
| TITLE NAME STREET ADDRESS CHY-ST-ZIP | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CHY-SI-ZIP | | | | IN | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | 000000755802 05/23/07-80004-821 150.00 |
| TITLE NAME STREET ADDRESS CHY-SI-ZIP | | , | | | |
| 12. I hereby of indicated of the corchanged, | certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee appropriate or on an attachment with an address with all | ing does not qualify for the exer nd accurate and that my signatu to execute this report as require oner like empowered. | mptions cor ire shall haved by Chap | ntained in Chapter 11 ve the same legal effe ter 607, Florida Statut | 9. Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if |

4-30-07