

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003583

Entity Name: SPECTORSOFT CORPORATION**Current Principal Place of Business:**1555 INDIAN RIVER BLVD., BLDG. B210
VERO BCH, FL 32960**Current Mailing Address:**1555 INDIAN RIVER BLVD., BLDG. B210
VERO BCH, FL 32960**FEI Number:** 59-3586778**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**THOMPSON, LARRY
1555 INDIAN RIVER BLVD., BLDG. B210
VERO BEACH, FL 32960 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	CHESLEY, RONALD
Address	1555 INDIAN RIVER BLVD., BLDG. B210
City-State-Zip:	VERO BCH FL 32960

Title	D
Name	WADSWORTH, ROBERT
Address	ONE FINANCIAL CENTER 44TH FLOOR
City-State-Zip:	BOSTON MA 02111

Title	PD
Name	JUDGE, JASON
Address	1555 INDIAN RIVER BLVD
City-State-Zip:	VERO BEACH FL 32960

Title	D
Name	VON SCHROETER, CARLO
Address	125 HIGH STREET HIGH STREET TOWER, 26TH FLOOR
City-State-Zip:	BOSTON MA 02110

Title	ST
Name	THOMPSON, LARRY
Address	1555 INDIAN RIVER BLVD
City-State-Zip:	VERO BEACH FL 32960

I hereby 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 all other like empowered.

SIGNATURE: LARRY THOMPSON**CFO****02/24/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date