

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000004464

Entity Name: CODE 42 SOFTWARE, INC.**Current Principal Place of Business:**1 MAIN ST SE #400
MINNEAPOLIS, MN 55414**Current Mailing Address:**1 MAIN ST SE #400
MINNEAPOLIS, MN 55414**FEI Number:** 41-2019591**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	CEOD
Name	DORNQUAST, MATTHEW
Address	ONE MAIN ST SE #400
City-State-Zip:	MINNEAPOLIS MN 55414

Title	PCOO
Name	BELL, BRIAN
Address	ONE MAIN ST SE #400
City-State-Zip:	MINNEAPOLIS MN 55414

Title	SCTO
Name	BISPALA, BRIAN
Address	ONE MAIN ST SE #400
City-State-Zip:	MINNEAPOLIS MN 55414

Title	D
Name	BISPALA, BRIAN
Address	ONE MAIN ST SE #400
City-State-Zip:	MINNEAPOLIS MN 55414

Title	CFO
Name	DUB, SUSAN
Address	ONE MAIN ST SE #400
City-State-Zip:	MINNEAPOLIS MN 55414

Title	D
Name	COOPET, MITCH
Address	ONE MAIN ST SE #400
City-State-Zip:	MINNEAPOLIS MN 55414

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: SUSAN DUB**CFO****02/05/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date