

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000005719

**Entity Name:** ASURE SOFTWARE, INC.

**Current Principal Place of Business:**

3700 N CAPITAL OF TEXAS HWY  
STE 350  
AUSTIN, TX 78746

**FILED**  
**Jun 29, 2020**  
**Secretary of State**  
**1530249370CC**

**Current Mailing Address:**

3700 N CAPITAL OF TEXAS HWY  
STE 350  
AUSTIN, TX 78746 US

**FEI Number: 74-2415696**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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: STEPHANIE HENCZ**

**06/29/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SANDBERG, DAVID  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title PRESIDENT, CEO, DIRECTOR  
Name GOEPEL, PATRICK  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title DIRECTOR  
Name DANIEL, GILL  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title CFO, SECRETARY, TREASURER  
Name BRANNON, KELYN  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title CHIEF REVENUE OFFICER  
Name GOLDSTEIN, EYAL  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title DIRECTOR  
Name OBERWAGER, BRADFORD  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title DIRECTOR  
Name LATHROP, CHARLES W. JR.  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

Title DIRECTOR  
Name DREW, WILLIAM CARL  
Address 3700 N CAPITAL OF TEXAS HWY  
STE 350  
City-State-Zip: AUSTIN TX 78746

**Continues on page 2**

*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: KELYN BRANNON**

**CFO, TREASURER,  
SECRETARY**

**06/29/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            REYNOLDS, BJORN  
Address        3700 N CAPITAL OF TEXAS HWY  
                  STE 350  
City-State-Zip: AUSTIN TX 78746