

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F00000004450

FILED
Aug 04, 2008
Secretary of State**Entity Name:** BLUE FROG SOLUTIONS, INC.**Current Principal Place of Business:**555 S. ANDREWS AVE., STE 202
POMPANO BEACH, FL 33069**New Principal Place of Business:**555 S. ANDREWS AVE.
SUITE 202
POMPANO BEACH, FL 33069**Current Mailing Address:**555 S. ANDREWS AVE.
SUITE 202
POMPANO BEACH, FL 33069**New Mailing Address:****FEI Number:** 36-4346616 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LEVINE, BRADLEY M
555 S. ANDREWS AVE., #202
POMPANO BEACH, FL 33069 US**Name and Address of New Registered Agent:**ADAMS, DALE E
555 S. ANDREWS AVE., #202
POMPANO BEACH, FL 33069 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: DALE E ADAMS

08/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** CEO () Delete
Name: PETTINGELL, GARRETT L
Address: 555 S. ANDREWS AVE., STE 202
City-St-Zip: POMPANO BEACH, FL 33069**Title:** PRES () Delete
Name: LEVINE, BRADLEY M
Address: 555 S. ANDREWS AVE., STE 202
City-St-Zip: POMPANO BEACH, FL 33069**Title:** DIR () Delete
Name: KEITH, DAVID
Address: 1 SECURITY BENEFIT PLACE
City-St-Zip: TOPEKA, KS 66636**Title:** DIR () Delete
Name: LEAF, ROGER W
Address: ONE PERSHING PLAZA
City-St-Zip: JERSEY CITY, NJ 07399**Title:** DIR () Delete
Name: PERNICANO, CHRISTOPHER J
Address: 2590 NE 43RD STREET
City-St-Zip: FORT LAUDERDALE, FL 33308**Title:** DIR () Delete
Name: OROS, ROBERT
Address: 9785 TOWNE CENTRE DRIVE
City-St-Zip: SAN DIEGO, CA 92121**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** CEO (X) Change () Addition
Name: SMITH, DAN R
Address: 555 S. ANDREWS AVE., STE 202
City-St-Zip: POMPANO BEACH, FL 33069**Title:** CFO (X) Change () Addition
Name: GILLIAM, JOHN
Address: 555 S. ANDREWS AVE., STE 202
City-St-Zip: POMPANO BEACH, FL 33069**Title:** DIR (X) Change () Addition
Name: MCINERNEY, TOM
Address: 555 S ANDREWS AVE., STE 202
City-St-Zip: POMPANO BEACH, FL 33069**Title:** DIR (X) Change () Addition
Name: GABRIELE, NEIL
Address: 555 S ANDREWS AVE., STE 202
City-St-Zip: POMPANO BEACH, FL 33069**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: DAN R SMITH

CEO

08/04/2008

Electronic Signature of Signing Officer or Director

Date