## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000001985

Entity Name: BLUE OCEAN SOFTWARE, INC.

FILED Jun 17, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
15310 AMBERLY DRIVE, SUITE 370 TAMPA, FL 33647				2202 N. WESTSHORE BLVD. SUITE 650 TAMPA, FL 33607			
Current Mailing Address:				New Mailing Address:			
C/O INTUIT INC. P.O. BOX 7850 ATTN: S. OLLIGES MS 71128 MOUNTAIN VIEW, CA 94039				C/O INTUIT INC. P.O. BOX 7850 ATTN: GAIL BLAS MOUNTAIN VIEW, CA 94039			
FEI Number:	06-1615661	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Status	Desired ( )
Name and	Address of Cu	ırrent Registered Agent:		Name and	Address of No	ew Registered A	gent:
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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.							
SIGNATUR	RE:						
Electronic Signature of Registered Agent						Date	
Election Cam		(2)(b), F.S., the corporation did not r Trust Fund Contribution(). ORS:	eceive t	·		TO OFFICERS AI	ND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () E STERN, RAYMOI 2535 GARCIA AV MOUNTAIN VIEW	'ENUE		Title: Name: Address: City-St-Zip:	D (X) CAMPAGNA, PE 2535 GARCIA AV MOUNTAIN VIEV	/ENUE	
Title: Name: Address: City-St-Zip:	P () [ WEISS, DAVID 15310 AMBERLY TAMPA, FL 3346			Title: Name: Address: City-St-Zip:	WEISS, DAVID	Change ( ) Addition HORE BLVD., SUITE 07	650
Title: Name: Address: City-St-Zip:	CFO () [ FELLOWS, LIND 2535 GARCIA AV MOUNTAIN VIEW	'ENUE		Title: Name: Address: City-St-Zip:	T (X) CAMPAGNA, PE 2535 GARCIA AV MOUNTAIN VIEV	/ENUE	
Title: Name: Address: City-St-Zip:	VP () E STERN, RAYMOI 2535 GARCIA AV MOUNTAIN VIEW	'ENUE		Title: Name: Address: City-St-Zip:	VP (X) PETER, PETER 2535 GARCIA AV MOUNTAIN VIEV		
Title: Name: Address: City-St-Zip:	VP () [ PAULSEN, GREG 2535 GARCIA AV MOUNTAIN VIEW	'ENUE		Title: Name: Address: City-St-Zip:	S (X) BASIL, MICHELL 2535 GARCIA AV MOUNTAIN VIEV	/ENUE	
Title: Name: Address: City-St-Zip:	AS (X) I WOLF, JANELLE 2535 GARCIA AV MOUNTAIN VIEW	'ENUE		Title: Name: Address: City-St-Zip:	( ) (	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHELLE BASIL S 06/17/2005