## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000003477

City-St-Zip:

CHAROLTTETOWN, PE C1A 6Z2

FILED Apr 29, 2009 Secretary of State

Entity Nan	ne: COGSDA	ALE SOFTWARE CORPORATI	ON				
Current Principal Place of Business:			New Pri	New Principal Place of Business:			
14 MACALI SUITE 5 CHARLOT		NADA, PE C1E2A1					
Current Mailing Address:			New Ma	New Mailing Address:			
14 MACALI SUITE 5 CHARLOT		ANADA, PE C1E2A1					
FEI Number:	98-0363498	FEI Number Applied For ( )	FEI Number Not A	pplicable ( )	Certificate of Status Desi	red ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SHIPPY, DAREN L 2548 BLAIRSTONE PINES DRIVE TALLAHASSEE, FL 32301 US				NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 US			
The above in the State	named entity of Florida.	submits this statement for the p	urpose of changin	g its registere	d office or registered agen	t, or both,	
SIGNATURE: D.E. HOWARTH				04/29/2009			
	Electro	nic Signature of Registered Age	ent		Date		
Election Can	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PERRY, DAVID 8 GAMMA COU		Title: Name: Address: City-St-Zip	):	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	SHAW, DUNCA 58 GEORGE S		Title: Name: Address: City-St-Zip		(X) Change ( ) Addition NCAN E SAMUEL DR S PLAINS, NS B4B1L9		
Title: Name: Address:	CFO ( GAUDIN, TODI 96 WESTRIDG		Title: Name: Address:		( ) Change ( ) Addition		

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.

City-St-Zip:

SIGNATURE: TODD GAUDIN **CFO** 04/29/2009