
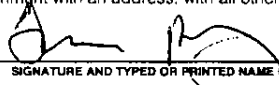


FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90015 048 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F05000005949			
1. Entity Name FRONTRANGE SOLUTIONS USA INC			
Principal Place of Business 4120 DUBLIN BLVD., SUITE 200 DUBLIN, CA 94568		Mailing Address 4120 DUBLIN BLVD., SUITE 200 DUBLIN, CA 94568	
2. Principal Place of Business - No P.O. Box # 5675 Gibraltar Dr.		3. Mailing Address 1150 Kelly Johnson Blvd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 100	
City & State Pleasanton CA		City & State Colorado Springs CO	
Zip 94588	Country USA	Zip 80920	Country USA
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		4. FEI Number 84-1256502 Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> - \$8.75 Additional Fee Required	
7. Name and Address of New Registered Agent			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City		FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PC MCCLOSKEY, MICHAEL J 4120 DUBLIN BLVD., SUITE 200 DUBLIN, CA 94568 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5675 Gibraltar Dr. Pleasanton CA 94588
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HUANG, FRANKLIN P 4120 DUBLIN BLVD., SUITE 200 DUBLIN, CA 94568 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5675 Gibraltar Dr. Pleasanton CA 94588
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BAKER, STEPHEN T 4120 DUBLIN BLVD., STE 200 DUBLIN, CA 94568 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5675 Gibraltar Dr. Pleasanton CA 94588
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		22 Feb 08 925-398-1800	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	