## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000004334

Entity Name: CALLMINER, INC.

FILED Feb 18, 2009 Secretary of State

4310 METR							
	Current Principal Place of Business:			New Principal Place of Business:			
	4310 METRO PKWY., SUITE 210 FT. MYERS, FL 33916				4310 METRO PKWY., SUITE 290 FT. MYERS, FL 33916		
Current Ma	iling Addres	ss:		New Maili	ng Address:		
4310 METRO PKWY., SUITE 210 FT. MYERS, FL 33916			4310 METRO PKWY., SUITE 290 FT. MYERS, FL 33916				
FEI Number: 3	32-0026627	FEI Number Applied For (	) FEI Nur	mber Not Appl	licable ( ) Certificate of Status Desired ( )		
Name and A	Address of C	urrent Registered Ager	nt:	Name and	Address of New Registered Agent:		
GALLINO, JEFFREY A 4310 METRO PKWY., SUITE 210 FT. MYERS, FL 33916 US			GALLINO, JEFFREY A 4310 METRO PKWY., SUITE 290 FT. MYERS, FL 33916 US				
The above r		submits this statement for	the purpose o	of changing i	its registered office or registered agent, or both,		
SIGNATURI	E:				02/18/2009		
	Electror	ic Signature of Registere	d Agent		Date		
Election Cam	paign Financing	g Trust Fund Contribution ( )	).				
OFFICERS	AND DIREC	TORS:		ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR		
Address:	PD ( ) LEAHY, TEREN 27 MERIAM ST LEXINGTON, M			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( ) RUA, DAN 12565 RESEAR ORLANDO, FL			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DAVOLI, ROBE	DUSE ST., SUITE 830		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address:	LACOURSIERE	KWY., SUITE 210		Title: Name: Address: City-St-Zip:	DV (X) Change () Addition GALLINO, JEFFREY A 4310 METRO PKWY., SUITE 290 FT MYERS, FL 33916		
City-St-Zip:		B. L. C.		Title:	OT		
City-St-Zip: Title: Name: Address: City-St-Zip:	BROWN, KIM C	KWY., SUITE 210		Name: Address: City-St-Zip:	ST (X) Change ( ) Addition BROWN, KIM C 4310 METRO PKWY., SUITE 290 FT. MYERS, FL 33916		

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: KIM C. BROWN ST 02/18/2009