

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004999

Entity Name: MARIPOSA SOFTWARE, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

591 CAMINO DE LA REINA  
SUITE 418  
SAN DIEGO, CA 92108

## New Principal Place of Business:

9295 PROTOTYPE DRIVE  
RENO, NV 89521

## Current Mailing Address:

2731 EXECUTIVE PARK DR  
SUITE 4  
WESTON, FL 33331

## New Mailing Address:

6355 SOUTH BUFFALO DRIVE  
ATTN: LEGAL MELISSA JENSEN  
LAS VEGAS, NV 89113

FEI Number: 33-0618806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR STE 4  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MATTHEWS, THOMAS J  
Address: 1085 PALMS AIRPORT DRIVE  
City-St-Zip: LAS VEGAS, NV 89119

Title: DST ( ) Delete  
Name: JOHNSON, DAVID D  
Address: 1085 PALMS AIRPORT DRIVE  
City-St-Zip: LAS VEGAS, NV 89119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HART, PATTI S  
Address: 6355 SOUTH BUFFALO DRIVE  
City-St-Zip: LAS VEGAS, NV 89113

Title: DST (X) Change ( ) Addition  
Name: JOHNSON, DAVID D  
Address: 6355 SOUTH BUFFALO DRIVE  
City-St-Zip: LAS VEGAS, NV 89113

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: DAVID D. JOHNSON

DST

04/23/2009

Electronic Signature of Signing Officer or Director

Date