

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002616

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** AVOLVE SOFTWARE CORP.

**Current Principal Place of Business:**

4835 EAST CACTUS ROAD  
SUITE 420  
SCOTTSDALE, AZ 85254

**New Principal Place of Business:**

**Current Mailing Address:**

4835 EAST CACTUS ROAD  
SUITE 420  
SCOTTSDALE, AZ 85254

**New Mailing Address:**

**FEI Number:** 26-4081788

**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 DRIVE  
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:** C  
**Name:** HEATH, GARY  
**Address:** 4835 EAST CACTUS ROAD, SUITE 445  
**City-St-Zip:** SCOTTSDALE, AZ 85254

**Title:** P  
**Name:** LOBACK, RONALD  
**Address:** 4835 EAST CACTUS ROAD, SUITE 445  
**City-St-Zip:** SCOTTSDALE, AZ 85254

**Title:** S  
**Name:** STRAIN, CARL  
**Address:** 4835 EAST CACTUS ROAD, SUITE 445  
**City-St-Zip:** SCOTTSDALE, AZ 85254

I hereby 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 all other like empowered.

SIGNATURE: RONALD LOBACK

CEO

02/15/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date