## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F10000001798

Entity Name: AMCOM SOFTWARE, INC.

Jul 27, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10400 YELLOW CIRCLE DRIVE SUTIE 100 10400 YELLOW CIRCLE DRIVE PRAIRIE, MN 55343

SUITE 100

PRAIRIE, MN 55343

**Current Mailing Address: New Mailing Address:** 

10400 YELLOW CIRCLE DRIVE 10400 YELLOW CIRCLE DRIVE SUTIE 100 PRAIRIE, MN 55343

SUITE 100

PRAIRIE, MN 55343

FEI Number: 41-1495313 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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

## **OFFICERS AND DIRECTORS:**

Title: CFOT

Name: MAYLEBEN, DANIEL

10400 YELLOW CIRCLE DRIVE SUITE 100 Address:

City-St-Zip: PRAIRIE, MN 55343

Title: SD

Name: MAYLEBEN, DANIEL

10400 YELLOW CIRCLE DRIVE SUITE 100 Address:

PRAIRIE, MN 55343 City-St-Zip:

Title: CEOD HEIM, CHRIS Name:

10400 YELLOW CIRCLE DRIVE SUITE 100 Address:

City-St-Zip: PRAIRIE, MN 55343

Title: VP-F

MEHR, MICHAEL Name:

10400 YELLOW CIRCLE DRIVE SUITE 100 Address:

City-St-Zip: PRAIRIE, MN 55343

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.

VP-F SIGNATURE: MICHAEL H. MEHR 07/27/2011