

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001157

Entity Name: CWC SOFTWARE, INC.

FILED
Jul 19, 2007
Secretary of State

Current Principal Place of Business:

150 GROSSMAN DR.
BRAINTREE, MA 02184

New Principal Place of Business:

Current Mailing Address:

150 GROSSMAN DR.
BRAINTREE, MA 02184

New Mailing Address:

FEI Number: 04-3021654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: P () Delete
Name: BEAN, JEFFREY W
Address: 6666 E. CHENEY DR.
City-St-Zip: PARADISE VALLEY, AZ 85253

Title: V () Delete
Name: BEAN, WILLIAM H.
Address: 21 FOSTER ST
City-St-Zip: CAMBRIDGE, MA 02138

Title: V () Delete
Name: CHARTOFF, ROSS S
Address: 7 ROCK ST.
City-St-Zip: MIDDLEBORO, MA 02346

Title: T () Delete
Name: CROSS, AMANDA B
Address: 1349 BAY DR.
City-St-Zip: SANIBEL, FL 33957

Title: VPSM () Delete
Name: CONTI, ANDREW C
Address: 46 PARADISE LN
City-St-Zip: HALIFAX, MA 02338

Title: V () Delete
Name: CHARTOFF, ISAAC M
Address: 150 BUCKMINSTER DR # 208
City-St-Zip: NORWOOD, MA 02062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROSS CHARTOFF

V

07/19/2007

Electronic Signature of Signing Officer or Director

Date