

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006419

FILED
Feb 08, 2007
Secretary of State

Entity Name: MADE2MANAGE SYSTEMS, INC.

Current Principal Place of Business:

450 E 96TH ST.
STE. 300
INDIANAPOLIS, IN 46240

New Principal Place of Business:

Current Mailing Address:

450 E 96TH ST.
STE. 300
INDIANAPOLIS, IN 46240

New Mailing Address:

FEI Number: 35-1665080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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: CEO () Delete
Name: TOGNONI, JEFF
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: AS () Delete
Name: KINDER, KATHERINE
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: () Delete
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TOGNONI, JEFF
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: VP (X) Change () Addition
Name: KINDER, KATHERINE
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: AS () Change (X) Addition
Name: MELTON, DON
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: DIR () Change (X) Addition
Name: TABORS, DAVE
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: DIR () Change (X) Addition
Name: AGRAWAL, NEERAJ
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

Title: DIR () Change (X) Addition
Name: ORLANDO, BRAVO
Address: 450 E. 96TH ST., STE. 300
City-St-Zip: INDIANAPOLIS, IN 46240

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN WRIGHT

MGR

02/08/2007

Electronic Signature of Signing Officer or Director

Date