FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800003823 1. Corporation Name

ENDEAVOR SOFTWARE INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90068 016 ***150.00

LNULA	YON GOT TWANE, ING.					
Principa Plac	ce of Business	Mailing Address				
702 E. GRAND	HWY	702 E. GRAND HWY.				
CLERMONT FL			CLERMONT FL 34711			
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
<u> </u>						07/06/1998
—	Place of Business	2a. Mailing Address				4. FEI Number Applied For
Suite Apt # etc		Suite, Apt. #, etc.			43-1729584 14ot Applicable	
Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Star	to	City & State				6. Election Campaign Financing S5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
24	25	29	30	-		Per ₃onal Property Tax. ☐ Yes No
	9. Name and Address of Cu					10. Name and Address of New Registered Agent
				81	Name	ne
	IKS, RICHARD A		ſ	82	Street	eet Address (P.O. Box Number is Not Acceptable)
	E. GRAND HWY.			-	Ollect	El Addicisa (1. S. 170x Hallings is Not Acceptable)
CLE	RMONT FL 34711			83		
				84	City	85 Zip Code
				۳,	City	FL ⁸³ ^{247,0000}
SIGNATURE	Signature, typed or printe 3 name of registere	_ 		Àgeni	t signature	ure required when reinsta ing) DATE
12.		ND DIRECTORS	13.			ADD TIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPST	☐ DELE				☐ Chang-} ☐ Additio
NAME	PARKS, RICHARD A		. 12 NA			
STREET AL DRESS	1				ADDRESS	.sc
CITY-ST-Z P	CLERMONT FL 34711	☐ DELE	1.4 CIT		-ZIP	Chang: Additio
TITLE						
NAME			2.2 NA			
STREET AL DRESS					ADDRESS	SS:
CITY-ST-ZP		DELE	2.40°		<u>ZIP</u>	Chang : Additio
NAME		_ 5000	32 NA			
STREET AL ORESS					ADDRESS	.90.
CITY-ST-ZP			3.4. Cl			
TITLE		☐ DELE			. <u>c</u> ir	☐ Change ☐ Additio
NAME			4. 2 NA			
STREET ALI DRESS					ADDRESS	SS
CITY-ST-Z P			4.4 CIT			
TITLE		☐ DELE				☐ Chang 3 ☐ Additio
NAME			5.2 NA	ME		
STREET ALIDRESS			5.3 ST	REET	ADDRESS	82.
CITY-ST-ZIP			5.4 CIT	Y-ST	-2IP	
TITLE		☐ DELE	T = 6.1 TIT	LE	-	☐ Chang э ☐ Additio
NAME			6 2 NA	ME		
STREET ADDRESS			6.3 STI	REET	ADDRES:	SG
t .	1		6.4 CIT	N/ OT	מול ."	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied at annual report is true and accurate and that my 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 hat my name appears in Block 12 or Block 13 if charged, or or an attachment with an address, with all other like empowered.

SIGNATURE:

CICHARD A.

352-243-1222