

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001297

FILED  
Jul 08, 2008  
Secretary of State

Entity Name: OMNICOMM SYSTEMS, INC.

**Current Principal Place of Business:**

2101 WEST COMMERCIAL BLVD  
SUITE 4000  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

2101 WEST COMMERCIAL BLVD.  
SUITE 4000  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

2101 WEST COMMERCIAL BLVD  
SUITE 4000  
FORT LAUDERDALE, FL 33309

FEI Number: 11-3349762

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LINARES, RONALD  
2101 WEST COMMERCIAL BLVD.  
SUITE 4000  
FORT LAUDERDALE, FL 33309 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CDS ( ) Delete  
Name: SMITH, RANDALL G  
Address: 2101 WEST COMMERCIAL BLVD. SUITE 4000  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: VAN KESTEREN, GUUS  
Address: 2101 WEST COMMERCIAL BLVD. SUITE 4000  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: WIT, CEES  
Address: 2101 WEST COMMERCIAL BLVD. SUITE 4000  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: V ( ) Delete  
Name: LINARES, RONALD T  
Address: 2101 WEST COMMERCIAL BLVD. SUITE 4000  
City-St-Zip: FORT LAUDERDALE, FL 33309

**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  
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: RONALD LINARES

VP

07/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date