

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005048

Entity Name: SOFTMED SYSTEMS, INC.

FILED
Jul 21, 2006
Secretary of State

Current Principal Place of Business:

12215 PLUM ORCHARD DRIVE
SILVER SPRING, MD 20904

New Principal Place of Business:

Current Mailing Address:

12215 PLUM ORCHARD DRIVE
SILVER SPRING, MD 20904

New Mailing Address:

FEI Number: 52-1322009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: C () Delete
Name: SEGAL, DONALD
Address: 12215 PLUM ORCHARD DR
City-St-Zip: SILVER SPRING, MD 20904

Title: CFO () Delete
Name: MATRONE, PHILIP
Address: 12215 PLUM ORCHARD DR
City-St-Zip: SILVER SPRING, MD 20904

Title: D () Delete
Name: VANARIA, ROBERT
Address: 10 EAGLE WAY
City-St-Zip: SEEKONK, MA 02771

Title: D () Delete
Name: BLOEM, KEN
Address: 5136 MACOMB ST NW
City-St-Zip: WASHINGTON, DC 20016

Title: D () Delete
Name: MORBY, JACQUELINE
Address: 125 HIGH STREET, STE 2500
City-St-Zip: BOSTON, MA 02110

Title: D () Delete
Name: TADLER, RICHARD
Address: 116 WOODLAND RD
City-St-Zip: PITTSBURGH, PA 15232

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:

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 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: PHILIP MATRONE

CFO

07/21/2006

Electronic Signature of Signing Officer or Director

Date