


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # K09125 1. Entity Name EOIRTA SOFTWARE, INC.		
Principal Place of Business 1 ENGLISH HILLS DR FREDERICKSBURG, VA 22406 US		Mailing Address 1 ENGLISH HILLS DR FREDERICKSBURG, VA 22406 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MOULTON, ANGELA M 6670 ESTERO BLVD, A202 FT. MYERS BEACH, FL 33931		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MOULTON, ANGELA M. 1 ENGLISH HILLS DR FREDERICKSBURG, VA	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Angela M. Moulton</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>1/16/04</u> <u>540-752-0423</u> <small>Date Daytime Phone #</small>



01062004 No Chg-P CR2E034 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

000000008581
01/20/04-80067-023 150.00

**DO NOT WRITE
IN THIS SPACE**

202-264-5308