

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K43904

FILED
Mar 29, 2007
Secretary of State

Entity Name: HARVEY SOFTWARE, INC.

Current Principal Place of Business:

7050 WINKLER RD
STE 104
FT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

7050 WINKLER RD
STE 104
FT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 65-0088926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMILTON, BERTIS F.
7050 WINKLER RD
STE 104
FT. MYERS, FL 33919 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: P () Delete
Name: HAMILTON, BERTIS F.,
Address: 15981 COUNTRY COURT
City-St-Zip: FT. MYERS, FL 33912

Title: D () Delete
Name: HAMILTON, BERTIS F.,
Address: 15981 COUNTRY COURT
City-St-Zip: FT. MYERS, FL 33912

Title: D () Delete
Name: BIRK, J.A.,
Address: 10167 SW 48 PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: VD () Delete
Name: COOK, ROBERT B.,
Address: 4601 GULFSHORE BLVD N
City-St-Zip: NAPLES, FL 34103

Title: T () Delete
Name: BIRK, J.A.,
Address: 10167 SW 48 PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: SD () Delete
Name: COX, JOE B
Address: 1185 IMMOKALEE RD STE 110
City-St-Zip: NAPLES, FL 34110

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: BERTIS F. HAMILTON

P

03/29/2007

Electronic Signature of Signing Officer or Director

_____ Date