2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K43904

Entity Name: HARVEY SOFTWARE, INC.

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7050 WINKLER RD STE 104 FT MYERS, FL 33919 **Current Mailing Address: New Mailing Address:** 7050 WINKLER RD STE 104 FT MYERS, FL 33919 US FEI Number: 65-0088926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAMILTON, BERTIS F. 7050 WINKLER RD STE 104 FT. MYERS, FL 33919 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HAMILTON, BERTIS F., Name: Name: 15981 COUNTRY COURT Address: Address: City-St-Zip: FT. MYERS, FL 33912 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HAMILTON, BERTIS F., Name: 15981 COUNTRY COURT Address: Address: FT. MYERS, FL 33912 City-St-Zip: City-St-Zip: Title: Title: D () Delete () Change () Addition BIRK, J.A., Name: Name: 10167 SW 48 PLACE Address: Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: VD () Delete Title: () Change () Addition COOK, ROBERT B., Name: Name: Address: 4601 GULFSHORE BLVD N Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BIRK, J.A., Name: 10167 SW 48 PLACE Address: Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: () Delete Title: () Change () Addition COX, JOE B Name: Name: 1185 IMMOKALEE RD STE 110 Address: Address: City-St-Zip: NAPLES, FL 34110 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: BERTIS F HAMILTON P 03/18/2008