2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 31, 2006
Secretary of State

DOCUMENT# L05000033480

Entity Name: RIGHTSOFT, LLC

Current Principal Place of Business:

13890 WHITE HERON PLACE
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

13890 WHITE HERON PLACE
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 65-1247852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NICHOLS, JAMES C
13890 WHITE HERON PLACE
JACKSONVILLE, FL 32224 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

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	LONGFIELD-SMITH, JOHN W	
Address:	12555 COUNTRY CHARM LANE	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:	MGRM	( ) Delete
Name:	NICHOLS, JAMES C	
Address:	13890 WHITE HERON PLACE	
City-St-Zip:	JACKSONVILLE, FL 32224	
Title:	MGRM	( ) Delete
Name:	MATOVICH, MAURICE	
Address:	61 TIFTON WAY N.	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	MGRM	( ) Delete
Name:	DANIEL, JAMES D II	
Address:	246 EDGEWATER BRANCH DRIVE	
City-St-Zip:	JACKSONVILLE, FL 32259	

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN LOGFIELD-SMITH MGRM 08/31/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date