2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L28744

Apr 21, 2005 Secretary of State

Entity Name: LINGUISTIC SOFTWARE PRODUCTS, INC.

US

Current Principal Place of Business: New Principal Place of Business:

992 WINTERBERRY DR MARCO ISLAND, FL 34145

Current Mailing Address: New Mailing Address:

992 WINTERBERRY DR

MARCO ISLAND, FL 34145 US

FEI Number: 65-0165102 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:

JANSSENS-LENS, PAUL

JANSSENS, PAUL 992 WINTERBERRY DRIVE 992 WINTERBERRY DRIVE US US MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145

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: PAUL JANSSENS 04/21/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JACOB, JOS JACOB, JOS Name: Name: 1842 DOGWOOD 1130 FERN CT Address: Address:

City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete Title: () Change () Addition

Name: BOWER, JANNIE Name: 992 WINTERBERRY DR. Address: Address: MARCO ISLAND, FL 34145 City-St-Zip: City-St-Zip:

Title: Title: **PCEO** () Delete **PCFO** (X) Change () Addition

JANSSENS-LENS, PAUL Name: JANSSENS, PAUL Name: 992 WINTERBERRY DR. 992 WINTERBERRY DR. Address: Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JANNIE BOWER 04/21/2005 S