

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009255

FILED  
May 01, 2006  
Secretary of State

Entity Name: SURVIVOR MONITOR SOFTWARE SYSTEMS, INC.

**Current Principal Place of Business:**

11592 WHITE MARSH BOULEVARD  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

11592 WHITE MARSH DRIVE  
WELLINGTON, FL 33414 US

**Current Mailing Address:**

11592 WHITE MARSH BOULEVARD  
WELLINGTON, FL 33414 US

**New Mailing Address:**

11592 WHITE MARSH DRIVE  
WELLINGTON, FL 33414 US

FEI Number: 13-4306239      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JANNEY & CURD, LLP  
290 COCONUT AVENUE  
SUITE 1-A  
SARASOTA, FL 34236 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

**OFFICERS AND DIRECTORS:**

Title: P,T      ( ) Delete  
Name: PITTS, CLAYTON  
Address: 11592 WHITE MARSH DRIVE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: VP,S      ( ) Delete  
Name: FIELD, DAVID H  
Address: 11592 WHITE MARSH DRIVE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: VP      ( ) Delete  
Name: WHEELER, DOUG JR.  
Address: 410 CLEAR CREEK TERRACE  
City-St-Zip: ROSWELL, GA 30076 US

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: /S/ CLAYTON PITTS

P, T

05/01/2006

Electronic Signature of Signing Officer or Director

Date