

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 COCOANUT 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 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