

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042603

Entity Name: EMBEDDED XLENCE, INC.

FILED
Apr 09, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 7789
JUPITER, FL 334687789

New Principal Place of Business:

P.O. BOX 5971
NAVARRE, FL 325669998

Current Mailing Address:

P.O. BOX 7789
JUPITER, FL 334687789

New Mailing Address:

P.O. BOX 5971
NAVARRE, FL 325669998

FEI Number: 65-1100394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICCOLO, DAVID M ESQ.
1738 45TH STREET
WEST PALM BEACH, FL 33407 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: KILLINGSWORTH, STEPHEN
Address: P.O. BOX 7789
City-St-Zip: JUPITER, FL 334687789

Title: DVS () Delete
Name: KILLINGSWORTH, HEIDA
Address: P.O. BOX 7789
City-St-Zip: JUPITER, FL 334687789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: KILLINGSWORTH, STEPHEN
Address: P.O. BOX 5971
City-St-Zip: NAVARRE, FL 325669998

Title: DVS (X) Change () Addition
Name: KILLINGSWORTH, HEIDA
Address: P.O. BOX 5971
City-St-Zip: NAVARRE, FL 325669998

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

SIGNATURE: STEPHEN KILLINGSWORTH

DPT

04/09/2006

Electronic Signature of Signing Officer or Director

Date