2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 22, 2005 08:00 AM Secretary of State

	ANNUAL	REPORT	1				S VO:UU
DOCU	MENT # P010000441	145		}	Se	cretar	y of State
Dentity Name GEAR SOFTWARE HOLDINGS, INC.				}			
GEAR SC	DF I WARE HOLDINGS, INC.						
Principal Plac	e of Business	Mailing Address		1			
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SUITE 250 Tequesta, F	FL 33469	SUITE 250 Tequesta, Fl 33469					
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			01032005	No Chg-P	CR2E034 (10/03)	
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				65-110		 _	Not Applicable
1	_	and the second designation of the second		5. Certificate	of Status Desired		75 Additional Required
	6. Name and Address of Current Ro	egistered Agent					
CORPORA	ATION SERVICE COMPANY		no	NOT W			
1201 HAYS STREET TALLAHASSEE, FL 32301-2525			DO NOT WRITE				
				IN THIS SPACE			
	named entity submits this statement for t	he purpose of changing its registe	red office or registe	red agent, or bot	h, in the State of Flo	rida. I am famil	iar with, and accept
SIGNATURE_							* * · · · · ·
SIGNATORE-	Signature, typed or printed name of registered egent are	I tille if applicable. (NOTE, Registe	red Agent signature require	d when reinstating)		DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution		.00 May Be ded to Fees			
10.	OFFICERS AND D	RECTORS			····		
TITLE	PSTD WRIGHTSON, FREDERICK W III					i zagaża	
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12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the faceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

561-575-4327 Daytime Phone #