2008 FOR PROFIT CORPORATION

INTLE NAME STREET ADDRESS CITY-ST-ZIP

Feb 11, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # P02000072521 1. Entity Name JTE SOFTWARE, INC. Principal Place of Business Mailing Address **4254 MEETING PL** 4254 MEETING PL SANFORD, FL 32773 SANFORD, FL 32773 01082008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 82-0552259 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DRAKE, LEE R DO NOT WRITE 4254 MEETING PL SANFORD, FL 32773 IN THIS SPACE 8. 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. I am familiar with and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Unnonnaaaaaaa After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE DRAKE, LEE R NAME STREET ADDRESS 4254 MEETING PL SANFORD, FL 32773 CITY-ST-ZIP HILE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER