2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 20, 2005 08:00 AM Secretary of State **DOCUMENT # P03000081163** PERÉGRINE SOFTWARE ENTERPRISES, INC. Principal Place of Business Mailing Address 811 PEREGRINE DRIVE 811 PEREGRINE DRIVE INDIALANTIC, FL 32903-4749 INDIALANTIC, FL 32903-4749 04172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0114918 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent GUNDLACH, WILLIAM DO NOT WRITE 811 PEREGRINE DRĪVE INDIALANTIC, FL 32903-4749 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE n GUNDLACH, WILLIAM NAME 811 PEREGRINE DRIVE STREET ADDRESS CITY-ST-ZIP INDIALANTIC, FL 329034749 U00000318379 04/20/05-80055-014 150.00 TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE C2TY - S7 - 71P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE STREET ADDRESS

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 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 giver like empowered.

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SIGNATURE:

CITY-ST-ZIP

MILLIAM GUNDLACH

1/18/2005 321 2

321 258-9772

Devtime Phone #

FILED