

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000059838**

1. Entity Name  
**TEMERITY SOFTWARE, INC.**



Principal Place of Business  
**475 CENTRAL AVE STE 300  
ST PETERSBURG, FL 33701**

Mailing Address  
**475 CENTRAL AVE STE 300  
ST PETERSBURG, FL 33701**

**DO NOT WRITE IN THIS SPACE**



02012006 No Chg-P CR2E034 (11/05)

|                                    |                                                        |
|------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>20-1033819</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--------------------------------------------------------|

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CALLAHAN, MICHAEL T  
475 CENTRAL AVE STE 300  
ST PETERSBURG, FL 33701**

**DO NOT WRITE  
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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**000000432845  
02/23/06-00086-006 158.75**

**10. OFFICERS AND DIRECTORS**

|                                                    |                                                                                        |
|----------------------------------------------------|----------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>PST<br/>CALLAHAN, JAMES<br/>475 CENTRAL AVE STE 300<br/>ST PETERSBURG, FL 33701</b> |
|----------------------------------------------------|----------------------------------------------------------------------------------------|

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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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**DO NOT WRITE  
IN THIS SPACE**

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:**

*[Signature]*

**JAMES CALLAHAN - PRESIDENT**

**2/2/07**

**718-360-9611**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #