

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075820

FILED
Aug 28, 2006
Secretary of State

Entity Name: SOFTWARE ANALYTICAL SOLUTIONS, INC.

Current Principal Place of Business:

800 VILLAGE SQUARE CROSSING
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

5788 GOLDEN EAGLE CIRCLE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

800 VILLAGE SQUARE CROSSING
PALM BEACH GARDENS, FL 33410

New Mailing Address:

5788 GOLDEN EAGLE CIRCLE
PALM BEACH GARDENS, FL 33418

FEI Number: 20-1076066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURRIE, ROBERT A
800 VILLAGE SQUARE CROSSING
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

CURRIE, ROBERT A
5788 GOLDEN EAGLE CIRCLE
PALM BEACH GARDENS, FL 33418 US

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:

08/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CURRIE, D. ALLISON
Address: 5788 GOLDEN EAGLE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V () Delete
Name: CURRIE, ROBERT A
Address: 800 VILLAGE SQUARE CROSSING
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: CURRIE, ROBERT A
Address: 5788 GOLDEN EAGLE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: D. ALLISON CURRIE

PRES

08/28/2006

Electronic Signature of Signing Officer or Director

Date