

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000085488

Entity Name: DVERGENCE CORPORATION

FILED  
Oct 15, 2007  
Secretary of State

## Current Principal Place of Business:

11120 5TH ST.  
TREASURE ISLAND, FL 33706 US

## New Principal Place of Business:

## Current Mailing Address:

11120 5TH ST E  
TREASURE ISLAND, FL 33706 US

## New Mailing Address:

FEI Number: 20-2992059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUCKETT, LAURIE L ESQ.  
200 CENTRAL AVENUE  
SUITE 1600  
ST. PETERSBURG, FL 33701 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete  
Name: PUCKETT, DAVID W PRES.  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 33762 US

Title: P, D (X) Delete  
Name: MARTIN DEL CAMPO, JOHN R SR.V.P.  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 33762 US

Title: D (X) Delete  
Name: SCHWARTZ, BRAD  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 33762 US

Title: D (X) Delete  
Name: JOHNSON, CHARLIE  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 33762

Title: D (X) Delete  
Name: HINDMAN, JOHN  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 33762

Title: D (X) Delete  
Name: SCHACKER, BRIAN  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 33762

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change ( ) Addition  
Name: PUCKETT, DAVID W PRES.  
Address: 11120 5TH ST E  
City-St-Zip: TREASURE ISLAND, FL 33706 US

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: DAVID W PUCKETT

P.D.

10/15/2007

Electronic Signature of Signing Officer or Director

Date