2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 13, 2007
Secretary of State

DOCUMENT# P05000099652

Entity Name: LONG POND SOFTWARE INC.

Current Principal Place of Business:

PO BOX 544
FAIRFIELD, FL 32634

New Principal Place of Business:

9675 NW 172 PLACE
REDDICK, FL 32686

Current Mailing Address:

PO BOX 544
FAIRFIELD, FL 32634

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARFIELD, URSULA
9675 NW 172 PLACE
REDDICK, FL 32686 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: URSULA GARFIELD

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GARFIELD, URSULA
Address: PO BOX 529
City-St-Zip: FAIRFIELD, FL 32634

Title: D ( ) Delete
Name: GARFIELD, ALBERT
Address: PO BOX 529
City-St-Zip: FAIRFIELD, FL 32634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: URSULA GARFIELD P 02/13/2007

Electronic Signature of Signing Officer or Director Date