2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P05000149753

Entity Name: WORKFORCE MANAGEMENT SOFTWARE GROUP, INC.

Current Principal Place of Business:

4215-B GATOR TRACE AVENUE
FORT PIERCE, FL 34982 US

New Principal Place of Business:

1805 SPOTTEN OWL DR SW
VERO BEACH, FL 32962 US

Current Mailing Address:

3245 W. MAIN STREET
SUITE 235-197
FRISCO, TX 75034

New Mailing Address:

FEI Number: 20-3766553 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRIEDMAN, JEFFREY A
1 SW 129TH AVENUE
SUITE 408
PEMBROKE PINES, FL 33027 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GONOS, DARYL A
Address: 4215-B GATOR TRACE AVENUE
City-St-Zip: FORT PIERCE, FL 34982

Title: VP ( ) Delete
Name: COTHARIN, TODD A
Address: 11708 BLACKHAWK DRIVE
City-St-Zip: FRISCO, TX 75034

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GONOS, DARYL A
Address: 1805 SPOTTEN OWL DR SW
City-St-Zip: VERO BEACH, FL 32962

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

Title: SEC ( ) Change (X) Addition
Name: SCHMIDT, PETER A
Address: 1026 DICKENS LANE
City-St-Zip: ALLEN, TX 75002

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: TODD COTHARIN VP 04/30/2007

Electronic Signature of Signing Officer or Director Date