

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149711

Entity Name: APPX SOFTWARE, INC.

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

11363 SAN JOSE BLVD.
SUITE 301
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11363 SAN JOSE BLVD.
SUITE 301
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 54-1464324 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIPPER, JAMES L
200 WEST FORSYTH STREET
SUITE C-6
JACKSONVILLE, FL 32202 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: PD () Delete
Name: FRIZZELL, STEVEN P
Address: 11363 SAN JOSE BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32223

Title: SD () Delete
Name: DEWITT, GARY
Address: 11363 SAN JOSE BLVD. #301
City-St-Zip: JACKSONVILLE, FL 32223

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

Title: () Delete
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City-St-Zip:

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City-St-Zip:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: DEWITT, GARY
Address: 650 HIWAY 27N
City-St-Zip: LAKE WALES, FL

Title: T () Change (X) Addition
Name: WILKE, MICHAEL
Address: 545 METRO PLACE SUITE 430
City-St-Zip: DUBLIN, OH 43017

Title: D () Change (X) Addition
Name: THORNTON, ROBERT
Address: 545 METRO PLACE SUITE 430
City-St-Zip: DUBLIN, OH 43017

Title: D () Change (X) Addition
Name: FARMER, NEAL
Address: 100 CORPORATE RIDGE SUITE 101
City-St-Zip: BIRMINGHAM, AL 35242

Title: AS () Change (X) Addition
Name: FRIZZELL, BRENDA
Address: 11363 SAN JOSE BLVD #301
City-St-Zip: JACKSONVILLE, FL 32223

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: BRENDA FRIZZELL

AS

02/27/2007

Electronic Signature of Signing Officer or Director

_____ Date