

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000028204

Entity Name: BLINK 3 SOFTWARE, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

4461 113RD TERRACE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

4461 113RD TERRACE
CORAL SPRINGS, FL 33065

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:

DAWN M. AUFENANGER PA
1440 CORAL RIDGE DRIVE
293
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

AUFENANGER, DAWN M ESQ
6800 BROKEN SOUND PARKWAY NW
SUITE 100
BOCA RATON, FL 33487 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: DAWN M AUFENANGER

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCBRIDE, SHERRI L
Address: 4461 113RD TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: VP () Delete
Name: MCBRIDE, JOHN P
Address: 4461 113RD TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CIO () Change (X) Addition
Name: DOWELL, RICHARD E
Address: 6448 WEST SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33067 US

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: SHERRI MCBRIDE

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date