

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000033199

FILED  
Mar 21, 2012  
Secretary of State

Entity Name: WEBWARE SYSTEMS INCORPORATED

**Current Principal Place of Business:**

100 EAST LINTON BOULEVARD  
SUITE 502-B  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

100 EAST LINTON BOULEVARD  
SUITE 502-B  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 27-0675960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHAPNICK, MICHAEL E  
100 EAST LINTON BOULEVARD  
SUITE 502-B  
DELRAY BEACH, FL 33483 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: PD  
Name: CHAPNICK, MICHAEL E  
Address: 100 EAST LINTON BOULEVARD, SUITE 502-B  
City-St-Zip: DELRAY BEACH, FL 33483

Title: S  
Name: CHAPNICK, MICHAEL E  
Address: 100 EAST LINTON BOULEVARD, SUITE 502-B  
City-St-Zip: DELRAY BEACH, FL 33483

Title: T  
Name: CHAPNICK, MICHAEL E  
Address: 100 EAST LINTON BOULEVARD, SUITE 502-B  
City-St-Zip: DELRAY BEACH, FL 33483

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL E CHAPNICK

PD

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date