## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000023245

Entity Name: PILGRIM SOFTWARE, INC.

FILED Jan 24, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2807 W. BUSCH BLVD STE 200					
TAMPA, FL	336184563 L	IS			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2807 W. BUSCH BLVD. SUITE 200 TAMPA, FL 336184563 US			STE 200	2807 W. BUSCH BLVD STE 200 TAMPA, FL 336184563 US	
FEI Number: 5	59-3202846	FEI Number Applied For ( ) FEI	Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address o	f New Registered Agent:	
F & L CORP. ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202 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.					
in the State of Florida.					
SIGNATURE:					
Election Camp		Signature of Registered Agent  Trust Fund Contribution ( ).		Date	
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	PD () [ UTJI, AMIJATI P.O. BOX 34145 TAMPA, FL 3369		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ()[ RAJENDRAN, PR 4809 SKY BLUE LUTZ, FL 33558	DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () [ LEEFLANG, SIM. 1117 KINGFISH   APOLLO BEACH	PLACE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPRD () [ RISAL, ATULYA 1409 BRILLIANT VALRICO, FL 33		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () EBENNETT, STEP 1 HARBOUR PLA TAMPA, FL 3360	ACE #375	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ()[ GUY, PHIL 107 BOX OAK SAN ANTONIO, T	Delete IX 78230	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: SIMAJATI LEEFLANG ST 01/24/2008