2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000083317

Entity Name: FRIENDLY SOFTWARE CORPORATION

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1628 HENTHORNE DRIVE STE 100 MAUMEE, OH 43537 US

Current Mailing Address: New Mailing Address:

159 LOOKOUT PL 159 LOOKOUT PL STE 101 STE 101

JACKSONVILLE, FL 32207 US MAITLAND, FL 32751 US

FEI Number: 59-3214980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RUBINO, NICHOLAS J
159 LOOKOUT PL
STE 101

RUBINO, NICHOLAS J
159 LOOKOUT PL
STE 101

JACKSONVILLE, FL 32207 US MAITLAND, FL 32751 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: 04/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 ENGEL, FRANK P
 Name:

 Address:
 1628 HENTHORNE DR STE 100
 Address:

 City-St-Zip:
 MAUMEE, OH 43537
 City-St-Zip:

Title: DP () Delete Title: () Change () Addition

 Name:
 BALES, WILLIAM T
 Name:

 Address:
 1628 HENTHORNE DR STE 100
 Address:

 City-St-Zip:
 MAUMEE, OH 43537
 City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition

Name: BALES, BRUCE F Name: BALES, BRUCE F

Address: 1628 HENTHORNE DR STE 100 Address: 1628 HENTHORNE DR STE 100

City-St-Zip: NEWARK, OH 43055 City-St-Zip: MAUMEE, OH 43537

 Title:
 D () Delete
 Title:
 D (X) Change () Addition

 Name:
 ESCHBACH, REWHARD
 Name:
 ESCHBACH, REINHARD

 Address:
 1628 HENTHORNE DR STE 100
 Address:
 1628 HENTHORNE DR STE 100

City-St-Zip: MAUMEE, OH 43537 City-St-Zip: MAUMEE, OH 43537

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM T. BALES DP 04/27/2004