

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000032809

Entity Name: EARTHISOFT, INC.

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

4141 PINE FOREST RD
CANTONMENT, FL 325336545

New Principal Place of Business:

Current Mailing Address:

4141 PINE FOREST RD
CANTONMENT, FL 325336545

New Mailing Address:

FEI Number: 59-3288969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARD, JOYCE
4141 PINE FOREST RD
CANTONMENT, FL 325336545 US

Name and Address of New Registered Agent:

BEARD, MITCHELL K
4141 PINE FOREST RD
CANTONMENT, FL 325336545 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: MITCHELL K. BEARD

04/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEARD, MITCHELL K
Address: 4141 PINE FOREST RD
City-St-Zip: CANTONMENT, FL 325336545 US

Title: VPSD () Delete
Name: MAGURN, JANET C
Address: P.O. BOX 1376
City-St-Zip: CONCORD, MA 01742 US

Title: VP (X) Delete
Name: KILLINGSWORTH, JOYCE B
Address: 304 MT. AIRY STREET
City-St-Zip: CANTONMENT, FL 325336567 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MITCHELL K. BEARD

PD

04/25/2007

Electronic Signature of Signing Officer or Director

Date