2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000010485

Entity Name: WING AND A PRAYER SOFTWARE, INC.

FILED Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
P O BOX ORLANDO	560174 O, FL 328560	0174		
Current Mailing Address:			New Mailing Address:	
P O BOX: ORLAND(560174 O, FL 328560	0174		
FEI Number	r: 59-3303044	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:
SUITE 150 ORLANDO	NGE AVE 00 O, FL 32801		e purpose of changing its registered	d office or registered agent, or both,
in the Stat	e of Florida.	-		
SIGNATU		onic Signature of Registered A	Agent	 Date
This corpor	Electr	onic Signature of Registered A to satisfy its Intangible Tax filing r ing Trust Fund Contribution ().	Agent requirement and elects to do so (X).	Date
This corpor Election Ca	Electr	to satisfy its Intangible Tax filing ring Trust Fund Contribution().	requirement and elects to do so (X).	Date ES TO OFFICERS AND DIRECTORS:
This corpor Election Ca	Electron Eligible Electron Eligible Electron Ele	to satisfy its Intangible Tax filing ring Trust Fund Contribution (). CTORS: () Delete PH M JR MARGARET DR	requirement and elects to do so (X).	
This corpor Election Ca OFFICER Title: Name: Address:	Electron is eligible impaign Finance IS AND DIRE DP MAST, JOSE 1305 LAKE MORLANDO, FOR DV CLINGER, R	to satisfy its Intangible Tax filing ring Trust Fund Contribution (). CCTORS: () Delete MARGARET DR L () Delete OBERT STONE TRAIL	requirement and elects to do so (X). ADDITIONS/CHANGE Title: Name: Address:	ES TO OFFICERS AND DIRECTORS:

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: ROBIN E. MAST DST 04/25/2002