## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000072504

Entity Name: NIMBLE SOFTWARE, INC.

FILED Jun 30, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

409 W HALLANDALE BCH BLVD 5881 CHESTER LANE SUITE 203 DAVIE, FL 33331 HALLANDALE BCH, FL 33009

**New Mailing Address: Current Mailing Address:** 

409 W HALLANDALE BCH BLVD 5881 CHESTER LANE SUITE 203 DAVIE, FL 33331 HALLANDALE BCH, FL 33009

FEI Number: 65-0609227 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:

FELDSTEIN, JASON FELDSTEIN, JASON 3500 MYSTIC POINTE DR 151 NW 115TH AVE **APT 3807** 407 AVENTURA, FL 33180 US PLANTATION, FL 33125 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: BARBARA FELDSTEIN

06/30/2004 Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

FELDSTEIN, JASON B. FELDSTEIN, JASON B. Name: Name: 5881 CHESTER LANE 151 NW 115TH AVE Address: Address: City-St-Zip: DAVIE, FL City-St-Zip: PLANTATION, FL 33325

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

FELDSTIEN, BARBARA M Name: Name: FELDSTEIN, BARBARA M 5881 CHESTER LANE Address: 5881 CHESTER LANE Address:

DAVIE, FL DAVIE, FL City-St-Zip: City-St-Zip:

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: BARBARA FELDSTEIN TS 06/30/2004