

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000006151

Entity Name: CANOPY SOFTWARE, INC.

FILED  
Jan 12, 2007  
Secretary of State

## Current Principal Place of Business:

CANOPY SOFTWARE, INC.  
1493 MARKET ST.  
TALLAHASSEE, FL 32312

## Current Mailing Address:

1493 MARKET ST  
TALLAHASSEE, FL 32312

## New Principal Place of Business:

CANOPY SOFTWARE, INC.  
1607 VILLAGE SQUARE BLVD., SUITE #8  
TALLAHASSEE, FL 32309

## New Mailing Address:

1607 VILLAGE SQUARE BLVD.  
SUITE 8  
TALLAHASSEE, FL 32309

FEI Number: 59-3359046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOSTER, STEPHEN K  
2020 SARA LEE LANE  
TALLAHASSEE, FL 323123546 US

## Name and Address of New Registered Agent:

FOSTER, STEPHEN K  
1607 VILLAGE SQUARE BLVD.  
SUITE 8  
TALLAHASSEE, FL 32309 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:

01/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FOSTER, STEPHEN K  
Address: 2020 SARA LEE LANE  
City-St-Zip: TALLAHASSEE, FL

Title: V ( ) Delete  
Name: FOSTER, JONATHAN W  
Address: 3458 LENOX MILL RD  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FOSTER, STEPHEN K  
Address: 2020 SARA LEE LANE  
City-St-Zip: TALLAHASSEE, FL

Title: P (X) Change ( ) Addition  
Name: FOSTER, JONATHON W  
Address: 3458 LENOX MILL RD  
City-St-Zip: TALLAHASSEE, FL 32308

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN FOSTER

D

01/12/2007

Electronic Signature of Signing Officer or Director

Date