

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2007 - 08:00 AM
Secretary of State

DOCUMENT # P96000063531 1. Entity Name INFOWARE SYSTEMS, INC.	
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Principal Place of Business 600 JACKSON COURT SATELLITE BEACH, FL 32937	Mailing Address 600 JACKSON COURT SATELLITE BEACH, FL 32937
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DO NOT WRITE IN THIS SPACE



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3407547	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LINTON, DONALD F 600 JACKSON COURT SATELLITE BEACH, FL 32937

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8. 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. I am familiar with, and accept the obligations of registered agent.

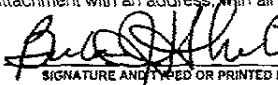
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	000000581891 01/11/07-80009-024 150.00
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LINTON, DONALD F 600 JACKSON COURT SATELLITE BEACH, FL 32937
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LINTON, BARBARA J. H 600 JACKSON COURT SATELLITE BEACH, FL 32937
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  BARBARA JH Linton SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	1/9/07 Date	321 773 5881 x+10 Daytime Phone #
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