

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000100868

FILED
Jan 03, 2007
Secretary of State

Entity Name: EXCEL SOFT INTERNATIONAL, INC.

Current Principal Place of Business:

1315 16TH CT SW
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

1315 16TH CT SW
VERO BEACH, FL 32962 US

New Mailing Address:

FEI Number: 65-0733142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAVES, A. JULIA
2205 14TH AVE.
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: ROLFE, GREGORY W
Address: 1315 16TH CT SW
City-St-Zip: VERO BEACH, FL 32962 US

Title: TREA () Delete
Name: MCCONKEY, LINDA M
Address: 919 TURTLE COVE LANE, APT 4
City-St-Zip: VERO BEACH, FL 32963 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TREA (X) Change () Addition
Name: ROLFE, ERIKA A
Address: 1315 16TH CT SW
City-St-Zip: VERO BEACH, FL 32962 US

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: GREGORY W. ROLFE

PRES

01/03/2007

Electronic Signature of Signing Officer or Director

_____ Date