FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700042629

1. Corporation Name

REALLY GREAT SOFTWARE WORKS, INC.

		_	
Principal	Place	of	Business

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90031 037 ***150.00



Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required \$8.75 Additional Fee Required Fee Required \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible	Principal Place	e of Business	Mailing Address			
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Country 59.3447.112 Most Applied For State 59.						
2. Principal Place of Business 2a. Mailing Address 4. Fell Humber Applied For Applied For 25 12 1997 180 180 180 180	TAMPA FL 336	15	TAMPA FL 33615			DO NOT WRITE IN THIS SPACE
2. Principal, Pirace of Business 2a. Mailing Address 4. FEI Number Applied For Mort Applicable 2. Suite, April, etc. 58.75 Additional 2. Suite, April, etc. 59.3447.112 State Not Applicable 2. City & State Ci	ļ					
2. Principal Piace of Systems 2. Mailing Address 3. Mailing Address 4. FEI Number 59-3447112 50-340710						<u>'</u>
Sulfer, Apt. 4, otic. Sulf	2. Principal P	lace of Business	2a. Mailing Address			
Solito, Apt. If, office Solito, Apt. If, o	21	Nave	26	-	7 L	59-3447112 .Not Applicable
22 27 City & State 28 Country Zig Zi		#, etc.	Suite, Apt. #, etc.			5 Continents of Status Desired (3) \$8.75 Additional
City & State City & State City & State Country Zip	22					5. Certificate of Status Desired Fee Required
Zip		te ·	City & State			
9. Name and Address of Current Registered Agent WILKINSON, GEORGE 9060 HICKORY CIRCLE TAMPA FL 33615 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept line appointment as registered agent, and familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept line appointment as registered agent, and familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept line appointment as registered agent, a familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept line appointment as registered agent, and familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept line appointment as registered agent, and the manufactures agent and the manufactures agent and the manufactures agent and the manufactures agent and the manufactures. 12. OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. WILKINSON, GEORGE 9060 HICKORY CIRCLE 13 TIME 22 NAME 22 NAME 22 NAME 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-2P 10 DELETE 21 TIME 22 CITY-ST-2P 10 DELETE 21 TIME 22 CITY-ST-2P 10 DELETE 23 TIME 24 CITY-ST-2P 10 DELETE 24 CITY-ST-2P 10 DELETE 25 TIME 26 CIRCLE 26 TIME 27 NAME 28 CITY-ST-2P 10 DELETE 28 TIME 28 CITY-ST-2P 28 TIME 28 CITY-ST-2P 29 CITY-ST-2P 20 CITY-ST-2P 20 CITY-ST-2P 20 CITY-ST	23					Trust Fund Contribution Added to Fees
9. Name and Address of Current Registered Agent WILKINSON, GEORGE 9060 HICKORY CIRCLE TAMPA FL 33615 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, nat accept the obligation of. Section 507,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, nate accept the obligation of. Section 507,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. TITLE 15. INTEL	<u>-</u>		<u> </u>	_	У	
WILKINSON, GEORGE 9060 HICKORY CIRCLE TAMPA FL 33615 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, a mile of the provision of Sections 607.0505, Florida Statutes, the above-named corporation is board of directors. I hereby accept the application agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation is board of directors. I hereby accept the application agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation is board of directors. I hereby accept the application agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent agents agent ag	24			0		Tolorial Tropological
WILKINSON, GEORGE 9060 HICKORY CIRCLE TAMPA FL 33615 82 Street Address (P.O. 8ox Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. an infamiliar with, and accept the obligations of, Section 807.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DWILKINSON, GEORGE 13 TITLE DWILKINSON, GEORGE 14 TITLE DWILKINSON, GEORGE 14 TITLE DWILKINSON, GEORGE 14 TITLE DWILKINSON, GEORGE 15 TITLE DWILKINSON, GEORGE 15 TITLE DWILKINSON, GEORGE DRIEFT ADDRESS DRIEFT ADDRESS DWILKINSON, GEORGE DRIEFT ADDRESS DRIEF		9. Name and Address of Cu	ment Registered Agent	- R	1. Name	IU. Raine and Address of New Registered Agont
9060 HICKORY CIRCLE TAMPA FL 33615 11. Pursuant to the provisions of Sections 607,0502, Plorida Statutes, the above-named corporation submits this statement for the purpose of changing its registored office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registored office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment are registored office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment are registored office or registered agent, and accept the obligations of, Section 697,0505, Florida Statutes, the appointment are registored of directors. I hereby accept the appointment are registored office or registered agent, or both, in the State of Florida, Such change is registored office or registered agent, or both, in the State of Florida, Such change is registored office or registered agent, or both, in the State of Florida, Such change is registored office or registered agent, or both, in the State of Florida, Such change is registored agent and the spontant and t	WILE	UNSON GEORGE		Ľ		
TAMPA FL 33615 Ball City	•			8:	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)
The provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the state agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent, and the corporation's board of directors. I hereby accept the appointment as registered agent and the corporation's board of directors. I hereby accept the appointment as registered agent and the corporation's board of directors. I have been depended agent and the corpor	1			8:	3	
11. Pursuant to the provisions of Sections 607 6502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature Signatur				8-	4 City	₽∎ 85 Zip Code
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent, or both, and accept the obligations of Section 607/555, Florida Statuties. Signature						
Signature, hypod or princip name of ingilatered agent and tile if ingiplative 2	l office or r	registered agent, or both, in the St	tate of Florida. Such change was aut	horized b	y the corpora	ation's board of directors. I hereby accept the appointment as registered
TILE DELETE 1.1 TILE DELETE 1.	SIGNATURE	Signature, typed or printed name of redistered	d agent and title if applicable. (NOTE: R	legistered Ap	ent signature requ	uired when reinstating) DATE
MILKINSON, GEORGE 12 NAME	12.		<u> </u>			
STREET ADDRESS	TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZPP TAMPA FL 33615 14 CITY-ST-ZPP VITLE DELETE 21 TITLE Change Addition NAME 22 NAME STREET ADDRESS CITY-ST-ZPP CITY-ST-ZPP 2.4 CITY-ST-ZPP Change Addition NAME 32 NAME CITY-ST-ZPP Change Addition STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZPP Change Addition TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 STREET ADDRESS CITY-ST-ZPP Change Addition STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZPP Change Addition TITLE 1.3 STREET ADDRESS CITY-ST-ZPP Change Addition NAME 5.3 STREET ADDRESS CITY-ST-ZPP Change Addition STREET ADDRESS 5.4 CITY-ST-ZPP Change Addition NAME 5.4 CITY-ST-ZPP Change Addition NAME 5.4 CITY-ST-ZPP Change Addition NAME 6.2 NAME Change Addition STREET ADDRESS CITY-ST-ZPP Change Addition NAME Change Ad	NAME	WILKINSON, GEORGE		1.2 NAME		
TITLE	STREET ADDRESS	9060 HICKORY CIRCLE		1.3 STRE	ET ADDRESS	
NAME	CITY-ST-ZIP	TAMPA FL 33615		1.4 CITY-	ST-ZIP	
23 STREET ADDRESS 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE	TITLE		☐ DELETE	2.1 TITLE	1	[] Change [] Addition
2.4 CITY-ST-ZIP	NAME	ĺ				
TITLE	STREET ADDRESS				ĺ	The second secon
NAME				_~_		(□Change □ Addition
STREET ADDRESS 33.STREET ADDRESS 34. CITY-ST-ZIP	1		[] Delete	1)	□ Grange □ Addiso
STREET ADDRESS STRE	NAME					
### TITLE		<u> </u>		4		
NAME			[] DELETE			☐ Change ☐ Addition
STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ļ	ļ	☐ NETE15		Į.	[Strange Model
A4 CITY-ST-ZIP		ĺ			ł	
TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP CTTLE Change Addition TITLE DELETE 8.1 TITLE Change Addition NAME 62 NAME CTTLE ADDRESS 6.3 STREET ADDRESS CTTLE ADDRESS		Į.		1	Į.	•
NAME			[] DELETE			☐ Change ☐ Addition
STREET ADDRESS					I .	
5A CITY-ST-ZIP 5A CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition	4					
TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS	1	}			ì	•
NAME 52 NAME 5.3 STREET ADDRESS 6.3 STREET ADDRESS			[7] DELETE			[] Change
STREET ADDRESS 6.3 STREET ADDRESS		İ		6.2 NAME	: 1	
STREET HOUNESS	1			1	i	
					!	·
STREET HOUNESS			□ DETF1E	6.2 NAME	: [L Change □ Addito
					!	·

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNAT