

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000076191

Entity Name: SOFTECH ALLIANCE, INC.

FILED
Aug 23, 2005
Secretary of State

Current Principal Place of Business:

3370 J CAPITAL CIR, NE
STE B
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1700 N. MONROE ST., PMB 107
STE 11
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3466175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, DENNIS L
4249 AUTUMN CT.
TALLAHASSEE, FL 32305 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

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: MEISER, JOYCE
Address: 115 REECE PARK LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: COO () Delete
Name: MARSTON, LYNN T
Address: 2825 PARRAMORE SHORES RD
City-St-Zip: TALLAHASSEE, FL 32310

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: HANSEN, CRYSTAL K
Address: 125 S. GILLEY RD
City-St-Zip: MONTICELLO, FL 32344

Title: COO (X) Change () Addition
Name: WILSON, DENNIS L
Address: 4249 AUTUMN CT
City-St-Zip: TALLAHASSEE, FL 32305

Title: DIR () Change (X) Addition
Name: MEISER, JOYCE
Address: 2143 PLANTATION FOREST DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: DIR () Change (X) Addition
Name: MARSTON, LYNN
Address: 4897 QUAIL VALLEY RD
City-St-Zip: TALLAHASSEE, FL 32309

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: LYNN MARSTON

DIR

08/23/2005

Electronic Signature of Signing Officer or Director

Date