2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 16, 2004 08:00 AM **DOCUMENT # P98000047466** Secretary of State 1. Entity Name SPEÉD DRILL SOFTWARE, INC. Principal Place of Business Mailing Address 412 BANYAN WAY P.O. BOX 510129 MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951-0129 CR2E034 (10/03) 01052004 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3516662 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WOOD, JAMES L DO NOT WRITE 412 BANYAN WAY MELBOURNE BEACH, FL 32951 IN THIS SPACE 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PTS WOOD, JAMES L NAME STREET ADDRESS 412 BANYAN WAY CITY-ST-ZIP MELBOURNE BEACH, FL 32951 U00000054032 02/16/04-80154-021 150.00 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE

12. 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 report or supplymental 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 attachmen

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

ER OR DIRECTOR