

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020510

Entity Name: INFINITE SOFTWARE, INC.

FILED
May 24, 2004
Secretary of State

Current Principal Place of Business:

7001 SW 24TH AVE
GAINESVILLE, FL 326073704

New Principal Place of Business:

7027 SW 24TH AVE
GAINESVILLE, FL 326073704

Current Mailing Address:

7001 SW 24TH AVE
GAINESVILLE, FL 326073704

New Mailing Address:

7027 SW 24TH AVE
GAINESVILLE, FL 326073704

FEI Number: 59-3565600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK, DARIN R
7001 SW 24TH AVE
GAINESVILLE, FL 326073704

Name and Address of New Registered Agent:

COOK, DARIN R
7027 SW 24TH AVE
GAINESVILLE, FL 326073704

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: DARIN COOK

05/24/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHANKS, ROBIN D SR
Address: 10515 SW 55TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

Title: VD () Delete
Name: COOK, DARIN
Address: 5724 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: TD () Delete
Name: BLASER, RICHARD
Address: 10104 SW 17TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: SD () Delete
Name: MCCULLOUGH, MARTHA
Address: 3426 NW 40TH STREET
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ROBIN SHANKS

P

05/24/2004

Electronic Signature of Signing Officer or Director

Date