

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **S78450** (1)  
1. Corporation Name  
**NEW ENGLAND SOFTWARE, INC.**



Principal Place of Business  
**601 EAST ROSERY ROAD, #4202  
LARGO FL 34640-3906**

Mailing Address  
**601 EAST ROSERY ROAD, #4202  
LARGO FL 34640-3906**

3. Date Incorporated or Qualified  
**09/03/1991**

3a. Date of Last Report  
**08/15/1995**

4. FEI Number  
**59-3082545**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business  
21 **2010 Oak View Lane**  
Suite, Apt #, etc  
22  
City & State  
23 **Palm Harbor, Florida**  
Zip  
24 **34683** Country  
25 **USA**

2a. Mailing Address  
26 **2010 Oak View Lane**  
Suite, Apt #, etc  
27  
City & State  
28 **Palm Harbor, Florida**  
Zip  
29 **34683** Country  
30 **USA**

9. Name and Address of Current Registered Agent  
**MCDANIEL, PEGGY L  
601 EAST ROSERY ROAD, #4202  
LARGO FL 34640-3906**

10. Name and Address of New Registered Agent  
81 Name  
**McDaniel, Peggy L.**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**2010 Oak View Lane**  
83  
84 City  
**Palm Harbor** FL 85 Zip Code  
**34683**

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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reappointing)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	MCDANIEL, ROBERT G	1.2 NAME	McDaniel, Robert G
STREET ADDRESS	601 EAST ROSERY ROAD, #4202	1.3 STREET ADDRESS	2010 Oak View Lane
CITY-ST-ZIP	LARGO FL	1.4 CITY-ST-ZIP	Palm Harbor, Florida 34683
TITLE	ST	2.1 TITLE	ST
NAME	MCDANIEL, PEGGY L	2.2 NAME	McDaniel, Peggy L
STREET ADDRESS	601 EAST ROSERY ROAD, #4202	2.3 STREET ADDRESS	2010 Oak View Lane
CITY-ST-ZIP	LARGO FL	2.4 CITY-ST-ZIP	Palm Harbor, Florida 34683
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-3-96 813-786-5288  
Date Daytime Phone

CR2E034 (3/96)