2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000002085

Entity Name: CONNEXIN SOFTWARE, INC.

Current Principal Place of Business:

602 W OFFICE CENTER DRIVE

SUITE 350

FORT WASHINGTON, PA 19034

Current Mailing Address:

602 W OFFICE CENTER DRIVE

SUITE 350

FORT WASHINGTON, PA 19034 US

FEI Number: 52-1382750 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC. 115 NORTH CALHOUN ST., SUITE 4 TALLAHASSEE, FL 32301 US

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

Officer/Director Detail:

Title CHAIRMAN, DIRECTOR Title CHIEF CLIENT OFFICER, DIRECTOR

Name FAHEY, KEVIN Name PYTLAK, FREDRICK

Address 274 RIVERSIDE AVE Address 602 W OFFICE CENTER DRIVE

> 2ND FLOOR SUITE 350

WESTPORT CT 06880 FORT WASHINGTON PA 19034 City-State-Zip: City-State-Zip:

PRESIDENT, CHIEF INFORMATION Title CEO, DIRECTOR Title

OFFICER, DIRECTOR ANDERSON, GREGORY H Name

MATLACK, MICHAEL Name 602 W OFFICE CENTER DRIVE Address

602 W OFFICE CENTER DRIVE Address SUITE 350

SUITE 350 FORT WASHINGTON PA 19034

City-State-Zip: FORT WASHINGTON PA 19034 City-State-Zip:

Title DIRECTOR

SIGNATURE: ELLEN PURDY

Title CFO, TREASURER, SECRETARY, Name

MCINERNEY, THOMAS E DIRECTOR

274 RIVERSIDE AVENUE Address Name PURDY, ELLEN

2ND FLOOR 602 W OFFICE CENTER DRIVE Address City-State-Zip:

WESTPORT CT 06880 SUITE 350

FORT WASHINGTON PA 19034 City-State-Zip:

Title **DIRECTOR**

Name BURGESS, JAMES Title CHIEF REVENUE OFFICER

274 RIVERSIDE AVENUE Name BROWN, KRAIG Address 2ND FLOOR

602 W OFFICE CENTER DRIVE Address WESTPORT CT 06880 City-State-Zip:

SUITE 350

City-State-Zip: FORT WASHINGTON PA 19034

I hereby 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 all other like empowered. 04/21/2017

Electronic Signature of Signing Officer/Director Detail

CFO, TREASURER, SECRETARY, DIRECTOR

FILED Apr 21, 2017

Secretary of State

CC3880915640

Date

Date