

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002616

**Entity Name:** AVOLVE SOFTWARE CORP.

**Current Principal Place of Business:**

21001 N TATUM BLVD  
STE 1630-503  
PHOENIX, AZ 85050

**Current Mailing Address:**

21001 N TATUM BLVD  
STE 1630-503  
PHOENIX, AZ 85050 US

**FEI Number:** 26-4081788

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HEATH, GARY  
Address 21001 N TATUM BLVD  
STE 1630-503  
City-State-Zip: PHOENIX AZ 85050

Title CFO  
Name MAYNE, JAY  
Address 21001 N TATUM BLVD  
STE 1630-503  
City-State-Zip: PHOENIX AZ 85050

Title DIRECTOR  
Name CLARK, LANCE  
Address 21001 N TATUM BLVD  
STE 1630-503  
City-State-Zip: PHOENIX AZ 85050

Title DIRECTOR  
Name MATTHEWS, JASON  
Address 21001 N TATUM BLVD  
STE 1630-503  
City-State-Zip: PHOENIX AZ 85050

Title PRESIDENT, SECRETARY  
Name LOMBARD, DAN  
Address ONE MARINA PARK DRIVE  
10TH FLOOR  
City-State-Zip: BOSTON MA 02210

Title TREASURER  
Name CHIASSON MCLAUGHRY, SABRINA  
Address ONE MARINA PARK DRIVE  
10TH FLOOR  
City-State-Zip: BOSTON MA 02210

*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.*

**SIGNATURE:** JAY MAYNE

CFO

04/21/2023

Electronic Signature of Signing Officer/Director Detail

Date