

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000749

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** FACILITY WIZARD SOFTWARE INCORPORATED

**Current Principal Place of Business:**

4147 N RAVENSWOOD AVE STE 400  
CHICAGO, IL 60613

**New Principal Place of Business:**

**Current Mailing Address:**

4147 N RAVENSWOOD AVE STE 400  
CHICAGO, IL 60613

**New Mailing Address:**

**FEI Number:** 36-4091908

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NRAI SERVICES, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: JOHNSON, DAVID J  
Address: 4147 N RAVENSWOOD AVE STE 400  
City-St-Zip: CHICAGO, IL 60613

Title: DT  
Name: ZUROWSKI, THOMAS A  
Address: 4147 N RAVENSWOOD AVE STE 400  
City-St-Zip: CHICAGO, IL 60613

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: DAVID J. JOHNSON

PS

04/30/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date