



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 101440		2. Name of Corporation THE SOFTWARE MILL, INC.			
3. Street Address Principal Business Office 224 West Main Road			City Little Compton	State RI	Zip 02837
4. Business Phone No. 401-635-4363		5. State of Incorporation RHODE ISLAND		6. SIC Code 7872	
7. Brief Description of the Character of Business Conducted in Rhode Island TO DEVELOP, PURCHASE, SELL, SUPPORT, PROGRAM AND SERVICE COMPUTERS, SOFTWARE AND MATTERS ANCILLARY THERE TO.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Daniel M. Chisholm			Vice President Name None		
Street Address 224 West Main Road			Street Address		
City Little Compton	State RI	Zip 02837	City	State	Zip
Secretary Name None			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 NO PAR VALUE			None		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date 2/15/05
Check No. 1153
By: DA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Daniel M. Chisholm
Signature of Officer Date
Daniel M. Chisholm
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

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(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 101440		2. Name of Corporation THE SOFTWARE MILL, INC.			
3. Street Address, Principal Business Office 224 West Main Road			City Little Compton	State RI	Zip 02837
4. Business Phone No. 401-635-4363		5. State of Incorporation RHODE ISLAND		6. SIC Code 7872	
7. Brief Description of the Character of Business Conducted in Rhode Island TO DEVELOP, PURCHASE, SELL, SUPPORT, PROGRAM AND SERVICE COMPUTERS, SOFTWARE AND MATTERS ANCILLARY THERETO.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Daniel M. Chisholm			Vice President Name None		
Street Address 224 West Main Road			Street Address		
City Little Compton	State RI	Zip 02837	City	State	Zip
Secretary Name None			Treasurer Name Daniel M. Chisholm		
Street Address			Street Address 224 West Main Road		
City	State	Zip	City Little Compton	State RI	Zip 02837
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 NO PAR VALUE			None		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 1 4 4 0 *

File Date 2/24/04
Check No. 1074
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 2/24/04
Signature of Officer Date
Daniel M. Chisholm
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 101440		2. Name of Corporation THE SOFTWARE MILL, INC.	
3. Street Address Principal Business Office 224 West Main Road		City Little Compton	State R.I.
4. Business Phone No. 401-635-4363		5. State of Incorporation RHODE ISLAND	Zip 02837
6. SIC Code 7872			

7. Brief Description of the Character of Business Conducted in Rhode Island
Software Consulting

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Daniel Chisholm (only officer)			Vice President Name None		
Street Address 224 West Main			Street Address		
City Little Compton	State RI	Zip 02837	City	State	Zip
Secretary Name			Treasurer Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	NO PAR VALUE		0		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 1 4 4 0 *

File Date: 4.30.03
Check No.: 1598
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature] Date: 3/9/03
Print or Type Name of Officer: Daniel M. Chisholm
Title of Officer: President



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101440 2. Name of Corporation THE SOFTWARE MILL, INC.
3. Street Address Principal Business Office 224 West Main Road City Little Compton State RI Zip 02837
4. Business Phone No. 401-635-4363 5. State of Incorporation RHODE ISLAND 6. SIC Code 7872

7. Brief Description of the Character of Business Conducted in Rhode Island
Software Development

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <u>Daniel Chisholm</u> Street Address <u>224 W. Main</u> City <u>Little Compton</u> State <u>RI</u> Zip <u>02837</u>	Vice President Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____
Secretary Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____	Treasurer Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____	Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____
Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____	Director Name <u>NONE</u> Street Address <u>NONE</u> City _____ State _____ Zip _____

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
8,000 NO PAR VALUE		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
<u>NONE</u>		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 1 4 4 0 *

File Date: 4-16-02
Check No.: 1488
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 4/15/02
Signature of Officer Date
Daniel M. Chisholm
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101440	2. Name of Corporation THE SOFTWARE MILL, INC.		
3. Street Address Principal Business Office 224 West Main Road	City Little Compton	State RI	Zip 02837
4. Business Phone No. 401-635-9363	5. State of Incorporation RHODE ISLAND		
7. Brief Description of the Character of Business Conducted in Rhode Island Software Consulting			

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name Daniel M. Chisholm	Vice President Name
Street Address 224 W. Main Road	Street Address
City Little Compton	City
State RI	State
Zip 02837	Zip
Secretary Name	Treasurer Name
Street Address	Street Address
City	City
State	State
Zip	Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name Daniel M. Chisholm	Director Name none
Street Address 224 West Main Road	Street Address
City Little Compton	City
State RI	State
Zip 02837	Zip
Director Name none	Director Name none
Street Address	Street Address
City	City
State	State
Zip	Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>	11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>
AUTHORIZED SHARES	ISSUED SHARES
Number of Shares	Number of Shares
Class/Series	Class/Series
Par Value	Par Value
8,000 NO PAR VALUE	none

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 1 4 4 0 *

File Date: 2/13

Check No.: 1345

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Daniel Chisholm 2/11/01
Signature of Officer Date

Daniel Chisholm
Print or Type Name of Officer

President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101440		2. Name of Corporation THE SOFTWARE MILL, INC.			
3. Street Address Principal Business Office 224 WEST MAIN ROAD			City LITTLE COMPTON	State RI	Zip 02837
4. Business Phone No.		5. State of Incorporation RHODE ISLAND		6. SIC Code 7872	
7. Brief Description of the Character of Business Conducted in Rhode Island SOFTWARE/COMPUTING CONSULTING AND DESIGN					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DANIEL CHISHOLM			Vice President Name SAME AS PRESIDENT		
Street Address 224 WEST MAIN ROAD			Street Address		
City LITTLE COMPTON	State RI	Zip 02837	City	State	Zip
Secretary Name SAME AS PRESIDENT			Treasurer Name SAME AS PRESIDENT		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DANIEL CHISHOLM			Director Name		
Street Address 224 W. MAIN ROAD			Street Address		
City LITTLE COMPTON	State RI	Zip 02837	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	NO PAR VALUE		100	COMMON	NO PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 1 4 4 0 *

File Date: **2-1-00**
Check No.: **1258**
By: **AMF**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Daniel Chisholm ✓ 1/31/2000
Signature of Officer Date

DANIEL CHISHOLM
Print or Type Name of Officer
PRESIDENT
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 101440		2. Name of Corporation THE SOFTWARE MILL, INC.			
3. Street Address Principal Business Office 224 WEST MAIN ROAD			City LITTLE COMPTON	State RI	Zip 02837
4. Business Phone No.		5. State of Incorporation RHODE ISLAND		6. SIC Code 7872	
7. Brief Description of the Character of Business Conducted in Rhode Island SOFTWARE ENGINEERING/CONSULTING					
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DANIEL CHISHOLM			Vice President Name SAME AS PRESIDENT		
Street Address 224 WEST MAIN ROAD			Street Address		
City LITTLE COMPTON	State RI	Zip 02837	City	State	Zip
Secretary Name SAME AS PRESIDENT			Treasurer Name SAME AS PRESIDENT		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name DANIEL CHISHOLM			Director Name		
Street Address 224 WEST MAIN RD.			Street Address		
City LITTLE COMPTON	State RI	Zip 02837	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000 NO PAR VALUE			100	COMMON	NO PAR

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: Jan 27 1999

Check No.: 1058

By: JD

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Daniel Chisholm ✓ 1/14/1999
Signature of Officer Date

DANIEL CHISHOLM
Print or Type Name of Officer

PRESIDENT
Title of Officer