

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006701

Entity Name: DEALERTRACK.COM, INC.

FILED
Mar 07, 2005
Secretary of State

Current Principal Place of Business:

105 MAXESS ROAD
SUITE N109
MELVILLE, NY 11747

New Principal Place of Business:

Current Mailing Address:

105 MAXESS ROAD
SUITE N109
MELVILLE, NY 11747

New Mailing Address:

FEI Number: 13-4115448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: COX, ROBERT
Address: 105 MAXESS ROAD
City-St-Zip: MELVILLE, NY 11747

Title: D () Delete
Name: BARRINGTON, MICHAEL
Address: 801 CHERY STREET STE 3900
City-St-Zip: FORT WORTH, TX 76102

Title: D () Delete
Name: WOLFE, TOM
Address: 23 PASTEUR
City-St-Zip: IRVINE, CA 92618

Title: D () Delete
Name: CHOCK, CARTY
Address: 1221 AVE OF THE AMERICAS 40TH FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: D () Delete
Name: CIRILLO-GOLDBERG, MARY
Address: 660 MADISON AVE 14TH FLOOR
City-St-Zip: NEW YORK, NY 10021

Title: D () Delete
Name: COSSO, LOU
Address: 550 CALIFORNIA ST 7TH FLOOR
City-St-Zip: SAN FRANCISCO, CA 94104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BERCE, DAN
Address: 801 CHERY STREET STE 3900
City-St-Zip: FORT WORTH, TX 76102

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT COX

CFO

03/07/2005

Electronic Signature of Signing Officer or Director

Date