

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006079

FILED  
Jan 13, 2005  
Secretary of State

**Entity Name:** TRANSACTION TRACKING TECHNOLOGIES, INC.

**Current Principal Place of Business:**

209 TENTH AVENUE, SOUTH, SUITE 536  
NASHVILLE, TN 37203

**New Principal Place of Business:**

**Current Mailing Address:**

209 TENTH AVENUE, SOUTH, SUITE 536  
NASHVILLE, TN 37203

**New Mailing Address:**

**FEI Number:** 59-3459741

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
526 EAST PARK AVENUE  
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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: HEIM, WILLIAM (BILL)  
Address: 857 CURTIS WOOD LANE  
City-St-Zip: NASHVILLE, TN 37204

Title: V ( ) Delete  
Name: KLEIN, WILLIAM (BILL)  
Address: 7852 HARPETH VIEW DRIVE  
City-St-Zip: NASHVILLE, TN 37221

Title: S ( ) Delete  
Name: KEITH, JEFFREY J  
Address: 7245 DOVE DRIVE  
City-St-Zip: SCHERERVILLE, IN 46375

Title: CTO ( ) Delete  
Name: KOVAC, MICHAEL J  
Address: 401 LAKEWOOD CIRCLE  
City-St-Zip: OLDSMAR, FL 34677

Title: AS ( ) Delete  
Name: BERMAN, MICHAEL  
Address: 5305 FREDERICKSBURG WAY WEST  
City-St-Zip: BRENTWOOD, TN 37027

Title: CD ( ) Delete  
Name: BLACK, TOM  
Address: 6204 HARDING PIKE  
City-St-Zip: NASHVILLE, TN 37205

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:

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: WILLIAM KLEIN

SVP

01/13/2005

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

\_\_\_\_\_  
Date