## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

 PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

ANNUAL REPORT Secretary of State S9 FEB - 2 PH 12: 06 DIVISION OF CORPORATIONS 1999 DOCUMENT # F9700001335 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Corporation Name GEOTRACK, INC. Principal Place of Business Mailing Address 1170 RT 41 1170 RT 41 GURNEE IL 60031 GURNEE IL 60031 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/17/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 36-3661114 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes the current year Intangible 24 25 29 30 Personal Property Tax. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 CT Corporation System CORPORATION SERVICE COMPANY idress (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road 82 1201 HAYS STREET TALLAHASSEE FL 32301-2525 83 Zn 5324 84 City Plantation 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 60,0505, Florida Statutes.

SIGNATURE

ASST SEC. TAMEN ACTIONS OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 300002763913--4 -02/03/93--01079--007 DELETE TITLE 1.1 TOUE TAN, JONATHAN L NAME 1.2 NAME 1170 RT 41 STREET ADDRESS 1.3 STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 **GURNEE IL 60031** CITY-ST-ZIP 1.4 CITY-\$T-2IP DELETE TITLE 21 TITLE STO STD GAIL STAN NAME TAN, LAURIE A 22 NAME 1170 RT 41 STREET ADDRESS 23 STREET ADDRESS **GURNEE IL 60031** 2 4 CITY-ST-ZIP GURNEE 11 60031 CITY-ST-ZIP [] DELETE Addition TITLE 31TITLE L KRAUSE. KILLEARN CENTER # D16 NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS ALLAHASSEE 32*30*8 3.4. CITY-ST-ZIP CITY-ST-ZIP ( ) DELETE ASST. SECRETARY TITLE 4.1 TITLE BRYAN KEYT ZFIRST NATIONAL PLAZA NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADORESS 1410 ACO, 11 60602 CIRY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5 1 TITLE ☐ Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-\$1-7IP CITY-ST-ZIP [] DELETE 61 TITLE [ ] Addition TITLE [1] Change 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all pither like empowered

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

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