

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90383 043 ***150.00

0052019

DOCUMENT # K03530

1. Entity Name

KEY-TRAK, INC.

Principal Place of Business

Mailing Address

**1750 WEST BROADWAY
 SUITE 220
 OVIEDO FL 32765**

**1750 WEST BROADWAY
 SUITE 220
 OVIEDO FL 32765**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2891004**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☒ Delete
 NAME **QUEEN, MARK**
 STREET ADDRESS **1750 WEST BROADWAY, SUITE 220**
 CITY-ST-ZIP **OVEIDO FL**

TITLE **CD** ☐ Change ☒ Addition
 NAME **Robert T. Brockman**
 STREET ADDRESS **6700 Hollister**
 CITY-ST-ZIP **Houston, TX 77040**

TITLE **CDS** ☒ Delete
 NAME **SINGLETON, MARK**
 STREET ADDRESS **6075 BRECKINRIDGE BLVD STE 440**
 CITY-ST-ZIP **DULUTH GA**

TITLE **P** ☐ Change ☒ Addition
 NAME **Robert M. Nalley**
 STREET ADDRESS **6700 Hollister**
 CITY-ST-ZIP **Houston, TX 77040**

TITLE **V** ☒ Delete
 NAME **SMAIL, SAMUEL J**
 STREET ADDRESS **6075 BRECKINRIDGE BLVD STE 440**
 CITY-ST-ZIP **DULUTH GA 30096-4981**

TITLE **V** ☐ Change ☒ Addition
 NAME **Dan Agan**
 STREET ADDRESS **6700 Hollister**
 CITY-ST-ZIP **Houston, TX 77040**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Change ☒ Addition
 NAME **Kenneth E. Bunney**
 STREET ADDRESS **6700 Hollister**
 CITY-ST-ZIP **Houston, TX 77040**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Change ☒ Addition
 NAME **Robert D. Burnett**
 STREET ADDRESS **6700 Hollister**
 CITY-ST-ZIP **Houston, TX 77040**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
 NAME **Alfred J. Thorpe**
 STREET ADDRESS **2700 Post Oak Blvd., Ste. 1440**
 CITY-ST-ZIP **Houston, TX 77056**

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kenneth E. Bunney

Kenneth E. Bunney, Secretary

4-22-01

713-718-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)