

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000020349

Entity Name: VERITEC SOLUTIONS, LLC

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

9428 BAYMEADOWS ROAD  
SUITE 600  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

9428 BAYMEADOWS ROAD  
SUITE 600  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 31-1812805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

VAN HORN, JAMES H  
9428 BAYMEADOWS ROAD  
SUITE 600  
JACKSONVILLE, FL 32256 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GROFF, NATHAN E  
Address: 9428 BAYMEADOWS ROAD SUITE 600  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM  
Name: REINHEIMER, THOMAS  
Address: 9428 BAYMEADOWS ROAD SUITE 600  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM  
Name: ZAITER, JEAN-PIERRE  
Address: 9428 BAYMEADOWS ROAD SUITE 600  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM  
Name: VAN HORN, JAMES H  
Address: 9428 BAYMEADOWS ROAD SUITE 600  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: POLLY G CORLESS

CFO

01/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date