## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000078266

Entity Name: SCIENCETRAX, LLC

Address:

City-St-Zip:

FILED May 07, 2005 Secretary of State

4406 RICHMOND PARK DRIVE EAST

JACKSONVILLE, FL 32224 US

**Current Principal Place of Business: New Principal Place of Business:** 4753 YELLOW STAR LANE WEST 4406 RICHMOND PARK DRIVE EAST JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32224 **Current Mailing Address: New Mailing Address:** 4753 YELLOW STAR LANE WEST 4406 RICHMOND PARK DRIVE EAST JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32224 FEI Number: 20-0669404 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PUTZKE, JOHN PUTZKE, JOHN 4406 RICHMOND PARK DRIVE EAST 4753 YELLOW STAR LANE WEST JACKSONVILLE, FL 32224 JACKSONVILLE, FL 32224 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: JOHN PUTZKE 05/07/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: () Delete Title: ( ) Change (X) Addition PUTZKE, JOHN D Name: Name: Address: Address: 4406 RICHMOND PARK DRIVE EAST City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32224 US Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: PALIWODA, JOHN M Address: Address: 4406 RICHMOND PARK DRIVE EAST City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32224 US Title: () Delete Title: ( ) Change (X) Addition Name: HANKS, LESLIE A Name:

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 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.

Address:

City-St-Zip:

SIGNATURE: JOHN PUTZKE PRES 05/07/2005