

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90038 039 ****50.00

DOCUMENT # L06000067591 1. Entity Name TECHNICAL TRACK SERVICES, LLC					
Principal Place of Business 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259			Mailing Address 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04212007 Chg-LLC CR2E083 (12/06)	
Zip		Country		4. FEI Number 20-5169983	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SALAZAR, GERMAN 7700 N. KENDALL DRIVE SUITE 808 MIAMI, FL 33156				7. Name and Address of New Registered Agent Name Cynthia Lawrence Street Address (P.O. Box Number is Not Acceptable) 1075 Larkspur Loop City Jacksonville FL Zip Code 32259	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Cynthia Lawrence</i></u> DATE 4-21-07 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAWRENCE, DENNIS 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAWRENCE, DENNIS 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAWRENCE, DENNIS 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAWRENCE, DENNIS 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAWRENCE, DENNIS 1075 LARKSPUR LOOP JACKSONVILLE, FL 32259	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u><i>Dennis Lawrence</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				4-21-07 <small>Date</small>	
<small>Daytime Phone #</small>					

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