

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000000414

1. Entity Name
SOURCETRACK LLC

Principal Place of Business
100 SOUTH ASHLEY DR., STE 1100
TAMPA FL 33602

Mailing Address
100 SOUTH ASHLEY DR., STE 1100 C
TAMPA FL 33602

2. Principal Place of Business
5670 West Cypress St.
Suite, Apt. #, etc.
Tampa, FL 33607
City & State
33607

3. Mailing Address
Same
Suite, Apt. #, etc.
City & State

Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4310266

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HELMAN, ERIC
100 SOUTH ASHLEY DR., STE 1100
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name Eric T. Helman
Street Address (P.O. Box Number is Not Acceptable) Suite
5670 West Cypress St.
City Tampa FL Zip Code 33607

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE CEO MGRM
NAME ERIC T. HELMAN
STREET ADDRESS 5670 W. CYPRESS ST STE C
CITY-ST-ZIP TAMPA, FL 33607

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200003888412--6
-03/20/01--01078--001
*****50.00 *****50.00

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CITY-ST-ZIP

11. 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 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date Daytime Phone #

0017351 AF

CR2E083 (11/00)

