

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001610

Entity Name: HBK SORCE FINANCIAL LLC

FILED
Mar 05, 2009
Secretary of State

Current Principal Place of Business:

3838 TAMIAMI TRAIL NORTH
STE 200
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

7680 MARKET STREET
YOUNGSTOWN, OH 44512

New Mailing Address:

FEI Number: 34-1925718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAER, DAN E CPA
HILL, BARTH & KING LLC
3838 TAMIAMI TRAIL STE 200
NAPLES, FL 34103 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 () Delete
Name: HILL, BARTH & KING F, INANCIAL HOLDI N GS LLC
Address: 7680 MARKET STREET
City-St-Zip: YOUNGSTOWN, OH 44512

Title: MGRM () Delete
Name: SORCE, CHRISTOPHER
Address: 235 W 6TH ST
City-St-Zip: ERIE, PA 16507

Title: MGRM (X) Delete
Name: SORCE, GREGORY
Address: 235 W 6TH ST
City-St-Zip: ERIE, PA 16507

Title: MGRM (X) Delete
Name: PICCIRILLO, DEAN
Address: 235 W 6TH ST
City-St-Zip: ERIE, PA 16507

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: IPRO ONE, INC.,
Address: 8010 SUMMERLIN LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33907

Title: MGR (X) Change () Addition
Name: HBK SORCE HOLDINGS L, LC
Address: 7680 MARKET STREET
City-St-Zip: BOARDMAN, OH 44512

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: DOUGLAS W. STAHL

CFO

03/05/2009

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