

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000531

Entity Name: DATATRACPLUS, LLC

FILED  
Aug 30, 2006  
Secretary of State

**Current Principal Place of Business:**

8929 J.M. KEYNES DRIVE, SUITE 10  
CHARLOTTE, NC 28262

**New Principal Place of Business:**

**Current Mailing Address:**

8929 J.M. KEYNES DRIVE, SUITE 10  
CHARLOTTE, NC 28262

**New Mailing Address:**

FEI Number: 56-2124328      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

MOONEY, DAVID E  
143 SEASONS DRIVE  
PUNTA GORDA, FL 33983      US

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

HENLEY, DAVID  
1929 SUMMIT RIDGE ROAD  
ORANGE PARK, FL 32003      US

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: DAVID HENLEY

08/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LUCAS, BARBARA B  
Address: 8929 J.M. KEYNES DRIVE, SUITE 10  
City-St-Zip: CHARLOTTE, NC 28262

Title: MGR      ( ) Delete  
Name: LUCAS, THOMAS R DR  
Address: 8929 J.M. KEYNES DRIVE, SUITE 10  
City-St-Zip: CHARLOTTE, NC 28262

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

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

Title: MGR      ( ) Change (X) Addition  
Name: LUCAS, JOHN  
Address: 8929 J.M. KEYNES DRIVE, SUITE 10  
City-St-Zip: CHARLOTTE, NC 28262

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA B. LUCAS

MGR

08/30/2006

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