

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000101086

Entity Name: KEEPING TRACK INC.

FILED  
Apr 27, 2005  
Secretary of State

**Current Principal Place of Business:**

9204 RUGER DR.  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

9204 RUGER DR.  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

FEI Number: 59-3655344      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CASSANESE, LISA  
9204 RUGER DR.  
NEW PORT RICHEY, FL 34655      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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VP      ( ) Delete  
Name: CASSANESE, LISA  
Address: 9204 RIVER DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: P      ( ) Delete  
Name: CASSANESE, ROBERT  
Address: 9204 RIVER DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP      (X) Change ( ) Addition  
Name: CASSANESE, LISA  
Address: 9204 RUGER DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: P      (X) Change ( ) Addition  
Name: CASSANESE, ROBERT  
Address: 9204 RUGER DR  
City-St-Zip: NEW PORT RICHEY, FL 34655

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA CASSANESE

VP

04/27/2005

Electronic Signature of Signing Officer or Director

Date