

TX 2009  
Ver. 1.2

05-102  
(Rev. 1-08/28)

TEXAS FRANCHISE TAX PUBLIC INFORMATION REPORT

(To be filed by Corporations or Limited Liability Companies (LLCS))  
This report MUST be filed to satisfy franchise tax requirements

2200

093241801637

■ Taxpayer number

12602265725

■ Report year

2009

You have certain rights under Chapter 552 and 559, Government Code to review, request, and correct information we have on file about you. Contact us at: (512) 463-4600, or (800) 252-1381, toll free nationwide.

Taxpayer name

Eckity Capital Markets, LLC

Mailing address

12336 Grayhawk Blvd

City

Frisco

State

TX

ZIP Code

75034

Plus 4

Secretary of State file number or Comptroller file number

0800845538

Check box if there are currently no changes or additions to the information displayed in Section A of this report. Then complete Sections B and C.

Entity's principal office

7668 Warren Pkwy Ste 325 Frisco TX 75034

Principal place of business

7668 Warren Pkwy Ste 325 Frisco TX 75034

Please sign below!

Officer, director and member information is reported as of the date a Public Information Report is completed. The information is updated annually as part of the franchise tax report. There is no requirement or procedure for supplementing the information as officers, directors, or members change throughout the year.



1260226572509

SECTION A. Name, title and mailing address of each officer, director or member.

Name

Title

Director

m m d d y y

James Talbert

Member

YES

Term expiration

Mailing address

7668 Warren Pkwy Ste 325

City

Frisco

State

TX

ZIP Code

75034

Name

Title

Director

m m d d y y

Jeffrey Carlson

Member

YES

Term expiration

Mailing address

12336 Grayhawk Blvd

City

Frisco

State

TX

ZIP Code

75034

Name

Title

Director

m m d d y y

Mailing address

City

Term expiration

YES

State

ZIP Code

SECTION B. Enter the information required for each corporation or LLC, if any, in which this reporting entity owns an interest of ten percent (10%) or more.

Name of owned (subsidiary) corporation or limited liability company

State of formation

Texas SOS file number, if any

Percentage of Ownership

NONE

Name of owned (subsidiary) corporation or limited liability company

State of formation

Texas SOS file number, if any

Percentage of Ownership

SECTION C. Enter the information required for each corporation or LLC, if any, that owns an interest of ten percent (10%) or more in this reporting entity.

Name of owned (parent) corporation or limited liability company

State of formation

Texas SOS file number, if any

Percentage of Ownership

NONE

Registered agent and registered office currently on file. (See instructions if you need to make changes)

Agent: Jeff Carlson

Check box if you need forms to change the registered agent or registered office information.

Office: 6136 Frisco Square Blvd #400

City

Frisco

State

TX

ZIP Code

75034

The above information is required by Section 171.203 of the Tax Code for each corporation or limited liability company that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B, and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director or member and who is not currently employed by this, or a related, corporation or limited liability company.

sign here

Title

MANAGING PARTNER

Date

11-16-09

Area code and phone number

972 239 1865

Texas Comptroller Official Use Only



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