

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107679

FILED
Apr 11, 2007
Secretary of State

Entity Name: CLINE PROCESSING RESOURCES INC

Current Principal Place of Business:

26845 STILLBROOK DR
WESLEY CHAPEL, FL 33543 US

New Principal Place of Business:

29425 BIRDS EYE DRIVE
WESLEY CHAPEL, FL 33543 US

Current Mailing Address:

26845 STILLBROOK DR
WESLEY CHAPEL, FL 33543 US

New Mailing Address:

29425 BIRDS EYE DRIVE
WESLEY CHAPEL, FL 33543 US

FEI Number: 20-5381994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINE, ALEXANDER
26845 STILLBROOK DR
WESLEY CHAPEL, FL 33543 US

Name and Address of New Registered Agent:

CLINE, ALEXANDER
29425 BIRDS EYE DRIVE
WESLEY CHAPEL, FL 33543 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: ALEXANDER CLINE

04/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLINE, ALEXANDER
Address: 26845 STILLBROOK
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: S () Delete
Name: BYRON, BELINDA
Address: 26845 STILLBROOK
City-St-Zip: WESLEY CHAPEL, FL 33543 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLINE, ALEXANDER
Address: 29425 BIRDS EYE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: S (X) Change () Addition
Name: WLADYKA, BELINDA
Address: 29425 BIRDS EYE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543 US

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 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: ALEXANDER CLINE

PR

04/11/2007

Electronic Signature of Signing Officer or Director

Date