

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H89270

**Entity Name:** MAINLINE INFORMATION SYSTEMS, INC.

**Current Principal Place of Business:**

1700 SUMMIT LAKE DR.  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

1700 SUMMIT LAKE DR.  
TALLAHASSEE, FL 32317 US

**FEI Number:** 59-2960721

**Certificate of Status Desired:** No

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

SHOWMAN, BRIAN  
1700 SUMMIT LAKE DR.  
TALLAHASSEE, FL 32317 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:** BRIAN SHOWMAN

04/24/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name KEARNEY, RICHARD S  
Address 1700 SUMMIT LAKE DR.  
City-State-Zip: TALLAHASSEE FL 32317

Title D  
Name HOWELL, WINSTON  
Address 1700 SUMMIT LAKE DR.  
City-State-Zip: TALLAHASSEE FL 32317

Title P  
Name MCCARTHY, JOHN R  
Address 1700 SUMMIT LAKE DRIVE  
City-State-Zip: TALLAHASSEE FL 32317

Title ST  
Name ELEBASH, JOSEPH P  
Address 1700 SUMMIT LAKE DR  
City-State-Zip: TALLAHASSEE FL 32317

Title D  
Name SHARE, LESLIE A  
Address 1700 SUMMIT LAKE DR  
City-State-Zip: TALLAHASSEE FL 32317

Title EVP  
Name MANN, ERIC  
Address 1700 SUMMIT LAKE DR.  
City-State-Zip: TALLAHASSEE FL 32317

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOSEPH P. ELEBASH

**SECRETARY**

04/24/2018

Electronic Signature of Signing Officer/Director Detail

Date