

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000805

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** LINE SYSTEMS, INC.

**Current Principal Place of Business:**

1645 WEST CHESTER PIKE  
SUITE 200  
WEST CHESTER, PA 19382

**New Principal Place of Business:**

**Current Mailing Address:**

1645 WEST CHESTER PIKE  
SUITE 200  
WEST CHESTER, PA 19382

**New Mailing Address:**

**FEI Number:** 23-3029302

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLANTON, EDWIN F  
810 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303 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

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: FIREMAN, RAYMOND  
Address: 1645 WEST CHESTER PIKE, SUITE 200  
City-St-Zip: WEST CHESTER, PA 19382

Title: STVC  
Name: FIREMAN, BARRY  
Address: 1645 WEST CHESTER PIKE, SUITE 200  
City-St-Zip: WEST CHESTER, PA 19382

Title: COO  
Name: MC GEARY, KEVIN  
Address: 1645 WEST CHESTER PIKE, SUITE 200  
City-St-Zip: WEST CHESTER, PA 19382

Title: CEO  
Name: MILLER, MIKE  
Address: 1645 WEST CHESTER PIKE, SUITE 200  
City-St-Zip: WEST CHESTER, PA 19382

Title: CFO  
Name: WEST, JOHN J  
Address: 1645 WEST CHESTER PIKE, SUITE 200  
City-St-Zip: WEST CHESTER, PA 19382

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: JOHN J. WEST

CFO

01/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date