

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90030 010 ***158.75

DOCUMENT # F05000005164 1. Entity Name OLD LINES HOLDINGS COMPANY	
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Principal Place of Business SUITE 510-257, 2519 MCMULLEN BOOTH RD. CLEARWATER, FL 33761	Mailing Address SUITE 510-257, 2519 MCMULLEN BOOTH RD. CLEARWATER, FL 33761
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DO NOT WRITE IN THIS SPACE



01062008 No Chg-P CR2E034 (11/05)

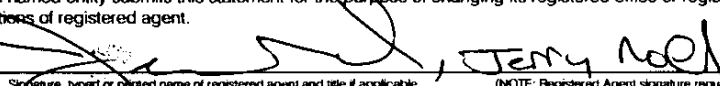
4. FEI Number 52-1729175	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

NOEL, JERRY
2451 MCMULLEN BOOTH RD., SUITE 248
CLEARWATER, FL 33759

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: 12/31/07
(NOTE: Registered Agent signature required when reinstating)

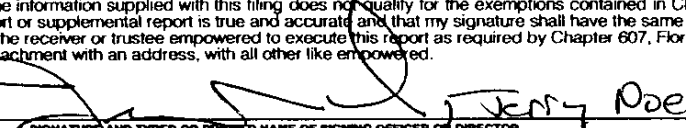
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPST NOEL, JERRY SUITE 510-257, 2519 MCMULLEN BOOTH RD. CLEARWATER, FL 33761
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 12/31/07 (727) 912-9395
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR