

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005701

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: FASTLINE PUBLICATIONS, INC.

## Current Principal Place of Business:

4900 FOX RUN RD.  
BUCKNER, KY 40010

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 248  
BUCKNER, KY 40010 US

## New Mailing Address:

FEI Number: 61-0990596

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCO ( ) Delete  
Name: HOWARD, WILLIAM  
Address: PO BOX 248, 4900 FOX RUN RD  
City-St-Zip: BUCKNER, KY 40010

Title: S ( ) Delete  
Name: BLAIR, RAYLENE  
Address: PO BOX 248, 4900 FOX RUN RD  
City-St-Zip: BUCKNER, KY 40010

Title: T ( ) Delete  
Name: HESS, TIMOTHY  
Address: PO BOX 248, 4900 FOX RUN RD  
City-St-Zip: BUCKNER, KY 40010

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY HESS

T

03/04/2009

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

\_\_\_\_\_  
Date