

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 27, 2006 08:00 AM
Secretary of State**

DOCUMENT # K89472

1. Entity Name
HOSELINE, INC.



Principal Place of Business
**1619 PARK COMMERCE CT.
ST. CLOUD, FL 34769 US**

Mailing Address
**1619 PARK COMMERCE CT
ST. CLOUD, FL 34769 US**



01162006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2949643

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GRAFTON, LINDA A.
1619 PARK COMMERCE COURT
ST CLOUD, FL 34769**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRAFTON, WILLIAM W.
STREET ADDRESS	1619 PARK COMMERCE CT
CITY-ST-ZIP	ST CLOUD, FL
TITLE	V
NAME	GRAFTON, LINDA A.
STREET ADDRESS	1619 PARK COMMERCE CT
CITY-ST-ZIP	ST CLOUD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000403457
02/06/06-80007-023 150.00

**DO NOT WRITE
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:

Linda A Grafton
Linda A Grafton
Vice President of
Hoseline Inc

Date

Daytime Phone #

1-17-06 407-892-2599