

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000014370

FILED
Jan 28, 2008
Secretary of State

Entity Name: BLUELINE SIMULATIONS, LLC

Current Principal Place of Business:

218 E. BEARSS AVENUE, SUITE 419
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

7105 ANGLESEY CT.
WAKE FOREST, NC 27587

New Mailing Address:

12400-2 WAKE UNION CHURCH RD
STE 32
WAKE FOREST, NC 27587

FEI Number: 03-0454932

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, C.A.
400 NORTH TAMPA STREET, SUITE 2300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

MOORE, C.A.
201 NORTH FRANKLIN STREET
SUITE 2000
TAMPA, FL 33602 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:

01/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GREGORY, C DANIEL
Address: 7105 ANGLESEY CT.
City-St-Zip: WAKE FOREST, NC 27587

Title: MGR () Delete
Name: MILLIKEN, DAVID
Address: 16212 TALAVERA DE AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: C DANIEL GREGORY

MR.

01/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date