


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000017707	
1. Entity Name MAINLINE FINANCIAL SERVICES, LLC	

Principal Place of Business 1700 SUMMIT LAKE DR. TALLAHASSEE, FL 32317	Mailing Address 1700 SUMMIT LAKE DR. TALLAHASSEE, FL 32317
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DO NOT WRITE IN THIS SPACE



04042007No Chg-LLC      CR2E083 (11/05)

4. FEI Number 04-3695844	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, FRED F JR  
 101 EAST COLLEGE AVE.  
 TALLAHASSEE, FL 32301

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

00000708402  
 04/24/07-80112-016 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KEARNEY, RICHARD S MR 1700 SUMMIT LAKE DRIVE TALLAHASSEE, FL 32317
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11. 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 is true and accurate and that my 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:       4/10/07      850-219-5149

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #