

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000032223

Entity Name: ASHLINE FINANCIAL, LLC

**FILED**  
**Mar 31, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

602 29TH AVE N  
ST PETERSBURG, FL 33704

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7548  
SEMINOLE, FL 33775

**New Mailing Address:**

FEI Number: 61-1436797

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SIMONE, STEPHEN CPA  
6439 CENTRAL AVE.  
ST. PETERSBURG, FL 337108411 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ASHLINE, DANIEL E MGRM  
Address: 602 29TH AVE N  
City-St-Zip: ST PETERSBURG, FL 33704 US

I hereby 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: DANIEL E ASHLINE

MGRM

03/31/2012

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