

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034630

Entity Name: STREAMLINES, LLC

FILED  
Sep 01, 2005  
Secretary of State

**Current Principal Place of Business:**

2635 SW 35TH PLACE  
302  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

2635 SW 35TH PLACE  
302  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

FEI Number: 47-0902723      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

JANSEN-TINGLING, ALTHEA C  
2635 SW 35TH PLACE  
302  
GAINESVILLE, FL 32608 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TINGLING, ALTHEA C  
Address: 2635 SW 35TH PLACE, #302  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM ( ) Delete  
Name: TINGLING, DAVE O  
Address: 2635 SW 35TH PLACE, #302  
City-St-Zip: GAINESVILLE, FL 32608

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: TINGLING, DAVE O  
Address: 2635 SW 35TH PLACE, #302  
City-St-Zip: GAINESVILLE, FL 32608 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVE O. TINGLING

MGRM

09/01/2005

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