

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004301

FILED
Aug 23, 2004
Secretary of State

Entity Name: BOTTOMLINE SOLUTIONS LLC

Current Principal Place of Business:

6490 ARAGON WAY #205
FORT MYERS, FL 33912

New Principal Place of Business:

10461 WASHINGTONIA PALM WAY
SUITE 3411
FORT MYERS, FL 33912

Current Mailing Address:

6490 ARAGON WAY #205
FORT MYERS, FL 33912

New Mailing Address:

10461 WASHINGTONIA PALM WAY
SUITE 3411
FORT MYERS, FL 33912

FEI Number: 59-3765676

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MACGREGOR, MICHAEL J
6490 ARAGON WAY #205
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

MACGREGOR, MICHAEL J
10461 WASHINGTONIA PALM WAY
#3411
FORT MYERS, FL 33912 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:

08/23/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MACGREGOR, MICHAEL J OWNER
Address: 10461 WASHINGTONIA PALM WAY, #3411
City-St-Zip: FORT MYERS, FL 33912 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: MICHAEL J. MACGREGOR

MGR

08/23/2004

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