

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004301

FILED  
Sep 13, 2005  
Secretary of State

Entity Name: BOTTOMLINE SOLUTIONS LLC

**Current Principal Place of Business:**

10461 WASHINGTONIA PALM WAY  
SUITE 3411  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

10461 WASHINGTONIA PALM WAY  
SUITE 3411  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 59-3765676      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:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

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

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

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

09/13/2005

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