

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000056716

FILED  
Aug 29, 2008  
Secretary of State

Entity Name: STREAMLINE CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

6210 SUN BLVD.  
ST. PETERSBURG, FL 33715

**New Principal Place of Business:**

6024 KIPPS COLONY DRIVE EAST  
GULF PORT, FL 33707

**Current Mailing Address:**

6210 SUN BLVD.  
ST. PETERSBURG, FL 33715

**New Mailing Address:**

6024 KIPPS COLONY DRIVE EAST  
GULF PORT, FL 33707

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

MARQUARDT, J. MATTHEW  
625 COURT STREET, SUITE 200  
CLEARWATER, FL 33756 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: MGR ( ) Delete  
Name: MAKRIS, JAMES  
Address: 6210 SUN BLVD.  
City-St-Zip: ST. PETERSBURG, FL 33715

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MAKRIS, JAMES  
Address: 6024 KIPPS COLONY DRIVE EAST  
City-St-Zip: GULF PORT, FL 33756

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES MAKRIS

MGR

08/29/2008

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