

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000099245

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** BLUE LINE WEB SOLUTIONS LLC

**Current Principal Place of Business:**

171 CREEKSIDE DR.  
ST. AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

171 CREEKSIDE DR.  
ST. AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 20-0956701

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAHAM, JOSEPH J  
171 CREEKSIDE DR.  
ST. AUGUSTINE, FL 32086 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  
**Name:** GRAHAM, SHANNON T  
**Address:** 171 CREEKSIDE DR.  
**City-St-Zip:** ST. AUGUSTINE, FL 32086

**Title:** MGR  
**Name:** OHANIAN, NICHOLAS J  
**Address:** 1421 7TH AVENUE  
**City-St-Zip:** SACRAMENTO, CA 95818

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:** SHANNON TAI GRAHAM

MGR

01/05/2010

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