

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000108657

FILED
Jan 19, 2009
Secretary of State

Entity Name: SHORELINE INNOVATIONS, LLC

Current Principal Place of Business:

4161 CAPRI DRIVE
PENSACOLA, FL 32504 US

New Principal Place of Business:

Current Mailing Address:

4161 CAPRI DRIVE
PENSACOLA, FL 32504 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, DANIEL
434 SOUTH NAVY BLVD.
PENSACOLA, FL 32507 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: MGRM () Delete
Name: SOMMERS, SHARON L
Address: 4161 CAPRI DRIVE
City-St-Zip: PENSACOLA, FL 32504 US

Title: MGRM () Delete
Name: MADAIO, JOEL T
Address: 4161 CAPRI DRIVE
City-St-Zip: PENSACOLA, FL 32504 US

ADDITIONS/CHANGES:

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

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

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: SHARON L. SOMMERS/JOEL T. MADAIO MGRM 01/19/2009

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