

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M04000004152

Entity Name: MAINLINE REALTY, LLC

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

11900 SAM ROPER DRIVE
CHARLOTTE, NC 28269

New Principal Place of Business:

Current Mailing Address:

11900 SAM ROPER DRIVE
CHARLOTTE, NC 28269

New Mailing Address:

FEI Number: 56-2265014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FENNEL, ARNE L
2291 W. AIRPORT BOULEVARD
SANFORD, FL 32771 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: TYSINGER, TIMOTHY E
Address: 11900 SAM ROPER DRIVE
City-St-Zip: CHARLOTTE, NC 28269

Title: MGR () Delete
Name: HENDERSON, ROBERT J
Address: 11900 SAM ROPER DRIVE
City-St-Zip: CHARLOTTE, NC 28269

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

ADDITIONS/CHANGES:

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

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

Title: CFO () Change (X) Addition
Name: FENNEL, ARNE L
Address: 11900 SAM ROPER DRIVE
City-St-Zip: CHARLOTTE, NC 28269

I hereby certify that the information supplied with this filing does not qualify for the 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: TIMOTHY E TYSINGER

MGR

04/04/2007

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