

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004710

FILED
Apr 28, 2005
Secretary of State

Entity Name: STREAMLINE TRANSPORTATION SYSTEMS, LLC

Current Principal Place of Business:

101 RIVER ROAD
FEDERALSBURG, MD 21632

New Principal Place of Business:

Current Mailing Address:

101 RIVER ROAD
FEDERALSBURG, MD 21632

New Mailing Address:

FEI Number: 20-1787143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEW, MICHAEL M
1180 WILDWOOD LAKES BLVD #305
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

DEW, MICHAEL M
1012-1 CONECTA DRIVE
PUNTA GORDA, FL 33950 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:

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: FLUHARTY, MICHAEL W
Address: 101 RIVER ROAD
City-St-Zip: FEDERALSBURG, MD 21632

Title: MGRM () Delete
Name: RIECK, HARRY H III
Address: 101 RIVER ROAD
City-St-Zip: FEDERALSBURG, MD 21632

Title: MGRM () Delete
Name: DEW, MICHAEL M
Address: 1180 WILDWOOD LAKES BLVD #305
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES:

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

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 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: HARRY H. RIECK III

MGRM

04/28/2005

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