

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000003467

**FILED**  
**Mar 30, 2007**  
**Secretary of State**

**Entity Name:** MAINLINE HOMELAND SECURITY PRODUCTS AND SERVICES, LLC

**Current Principal Place of Business:**

11900 SAN ROPER DRIVE  
CHARLOTTE, NC 28269

**New Principal Place of Business:**

11900 SAM ROPER DRIVE  
CHARLOTTE, NC 28269

**Current Mailing Address:**

11900 SAN ROPER DRIVE  
CHARLOTTE, NC 28269

**New Mailing Address:**

11900 SAM ROPER DRIVE  
CHARLOTTE, NC 28269

**FEI Number:** 20-2297984

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, MICHAEL  
214 FLORIDA AVE  
NEW SMYRNA BEACH, FL 32169 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: MAINLINE HOLDING COM, PANY, LLC  
Address: 11900 SAM ROPER DRIVE  
City-St-Zip: CHARLOTTE, NC 28269

Title: MGR ( ) Delete  
Name: MICHAEL GREEN CONSULT, TING, LLC  
Address: 1049 EDMISTON PLACE  
City-St-Zip: LONGWOOD, FL 32779

**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 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:** MICHAEL GREEN CONSULTING LLC

MGR

03/30/2007

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