## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000001429

Entity Name: FLITELINE, INC.

**FILED** Mar 15, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

237 LEXINGDALE DRIVE 4491 ESCONDIDO LANE ORLANDO, FL 32828

UNIT 75

N. CAPTIVA ISLAND, FL 33924

**Current Mailing Address:** New Mailing Address:

237 LEXINGDALE DRIVE 4930 BILL GARDNER PARKWAY ORLANDO, FL 32828 STE. 305

LOCUST GROVE, GA 30248

FEI Number: 59-3691631 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MADDEN, DAVID MADDEN, DAVID 237 LEXINGDALE DRIVE 4491 ESCONDIDO LANE ORLANDO, FL 32828 UNIT 75

N. CAPTIVA ISLAND, FL 33924 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: DAVID R. MADDEN 03/15/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

Title:

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title:

MADDEN, DAVID MADDEN, DAVID Name: Name: 237 LEXINGDALE DR Address: P.O. BOX 516 Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip: PINELAND, FL 33945

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R. MADDEN **PRES** 03/15/2006