

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134306

FILED
Apr 23, 2009
Secretary of State

Entity Name: BEELINE OPERATIONS CORP.

Current Principal Place of Business:

ONE INDEPENDENT DR
SUITE 800
JACKSONVILLE, FL 32202

Current Mailing Address:

ONE INDEPENDENT DR
SUITE 800
JACKSONVILLE, FL 32202

New Principal Place of Business:

ONE INDEPENDENT DRIVE
SUITE 800
JACKSONVILLE, FL 32202

New Mailing Address:

ONE INDEPENDENT DRIVE
SUITE 800
JACKSONVILLE, FL 32202

FEI Number: 56-2307249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SVPT () Delete
Name: CROUCH, ROBERT P SVPT
Address: ONE INDEPENDENT DR
City-St-Zip: JACKSONVILLE, FL 32202

Title: VPS () Delete
Name: HOLLAND, GREG D VPS
Address: ONE INDEPENDENT DR
City-St-Zip: JACKSONVILLE, FL 32202

Title: AS () Delete
Name: TUTOR, TYRA H AS
Address: ONE INDEPENDENT DR
City-St-Zip: JACKSONVILLE, FL 32202

Title: CEO () Delete
Name: PAYNE, TIMOTHY D CEO
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: VPT () Delete
Name: ROBINSON, GERALD G VPT
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: P () Delete
Name: WHITE, RICHARD L P
Address: 12724 W. GRAN BAY PARKWAY, SUITE 200
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SVPT (X) Change () Addition
Name: CROUCH, ROBERT P SVPT
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: VPS (X) Change () Addition
Name: HOLLAND, GREG D VPS
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

Title: AS (X) Change () Addition
Name: TUTOR, TYRA H AS
Address: ONE INDEPENDENT DRIVE
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: VPT (X) Change () Addition
Name: ROBINSON, GERALD G VPT
Address: ONE INDEPENDENT DRIVE, SUITE 800
City-St-Zip: JACKSONVILLE, FL 32202

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 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: GERALD ROBINSON

VPT

04/23/2009

Electronic Signature of Signing Officer or Director

Date