## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000081779

Entity Name: FAIRLINE FLORIDA BROKERAGE, INC.

FILED Jan 04, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2015 SW 20TH ST SUITE 102 FORT LAUDERDALE, FL 33315

Current Mailing Address: New Mailing Address:

2015 SW 20TH ST SUITE 102 FORT LAUDERDALE, FL 33315

FEI Number: 20-1987727 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:

MCMACHEN, GLENN W SR.

1535 SE 17TH. STREET

202

FORT LAUDERDALE, FL 33316 US

MCMACHEN, GLENN W SR.

2351 NE 48TH COURT

LIGHTHOUSE POINT, FL 33064

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: GLENN MCMACHEN 01/04/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: ( ) Delete Title: (X) Change ( ) Addition MCMACHEN, GLENN W SR. MCMACHEN, GLENN W SR. Name: Name: 1535 SE 17TH. STREET, SUITE 202 2351 NE 48TH COURT Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: S/T () Delete Title: S/T (X) Change () Addition
Name: MCMACHEN ARLENE A
Name: MCMACHEN ARLENE A

Name: MCMACHEN, ARLENE A
Address: 1535 SE 17TH STREET, SUITE 202 Address: 2351 NE 48TH COURT

City-St-Zip: FT. LAUDERDALE, FL 33316 US City-St-Zip: LIGHTHOUSE POINT, FL 333064 US

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 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: ARLENE MCMACHEN S/T 01/04/2006