## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000140752

City-St-Zip:

OLDSMAR, FL 34677 US

Entity Name: STRAIGHTLINE MANAGEMENT SERVICES INC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3350 ULMERTON ROAD 14		6008 INDUSTRIAL RO TAMPA, FL 33634	6008 INDUSTRIAL ROAD TAMPA, FL 33634 US		
CLEARW	ATER, FL 33762	2 US	ŕ		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
3350 ULMERTON ROAD			6008 INDUSTRIAL ROAD		
14 CLEARW	ATER, FL 33762	2 US	TAMPA, FL 33634 US		
FEI Number	r: 20-5857688	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
RUTIG, FI 8509 TID <i>A</i> TAMPA, F	AL BAY LANE				
	e named entity su e of Florida.	bmits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Ag	jent	Date	
Election Ca	mpaign Financing 1	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PTD () D RUTIG, FRANK E 8509 TIDAL BAY TAMPA, FL 3393	LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () D MONTOYA, EDIS 11917 NICKLAUS TAMPA, FL 3362	CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD () D MALOY, TIMOTH' 386 VENTURA DE		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: FRANK E RUTIG P 04/29/2009