

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066422

FILED
Apr 20, 2008
Secretary of State

Entity Name: CLINE FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

400 SE 12TH STREET
SUITE E
FORT LAUDERDALE, FL 33312

Current Mailing Address:

400 SE 12TH STREET
SUITE E
FORT LAUDERDALE, FL 33312

FEI Number: 26-0297470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLINE, TED
400 SE 12TH STREET
SUITE E
FORT LAUDERDALE, FL 33312 US

New Principal Place of Business:

400 SE 12TH STREET
SUITE E
FORT LAUDERDALE, FL 33316

New Mailing Address:

400 SE 12TH STREET
SUITE E
FORT LAUDERDALE, FL 33316

Name and Address of New Registered Agent:

CLINE, TED
400 SE 12TH STREET
SUITE E
FORT LAUDERDALE, FL 33316 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:

04/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,T () Delete
Name: CLINE, TED
Address: 820 TEQUESTA STREET
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,T (X) Change () Addition
Name: CLINE, TED
Address: 820 TEQUESTA STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

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: TED CLINE

P.T

04/20/2008

Electronic Signature of Signing Officer or Director

Date