2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 8:00 am
Secretary of State
01-14-2008 90106 037 ***150.00

DOCUMENT # P94000068293

1. Entity Name
FACTLINE, INC.

Principal Place of Business	Mailing Address
10779 GREENBRIAR VILLA DRIVE LAKE WORTH, FL 33467	10779 GREENBRIAR VILLA DRIVE LAKE WORTH, FL 33467

40003588

01102008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
10779 GREENBRIAR VILLA DR	10779 GREENBRIAR VILLA DR
Suite, Apt. #, etc.: N/A	Suite, Apt. #, etc.: N/A
City & State: WELLINGTON FL	City & State: WELLINGTON FL
Zip: 33449 Country: PALM BEACH	Zip: 33449 Country: PALM BEACH

4. FEI Number: 13-2912247 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HERSHFIELD, IRA
10779 GREENBRIAR VILLA DRIVE
~~LAKE WORTH, FL 33467~~
WELLINGTON, FL 33449

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______ DATE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	HERSHFIELD, IRA	
STREET ADDRESS	10779 GREENBRIAR VILLA DRIVE	
CITY-ST-ZIP	~~LAKE WORTH, FL 33467~~ WELLINGTON, FL 33449	
TITLE	D	☐ Delete
NAME	HERSHFIELD, ROSE	
STREET ADDRESS	10779 GREENBRIAR VILLA DRIVE	
CITY-ST-ZIP	~~LAKE WORTH, FL 33467~~ WELLINGTON FL 33449	
TITLE		☐ Delete
NAME		
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CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 1/12/08 (561)434-2888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

40003588

#P94000068293

1/17/2008

PLEASE NOTE:

WE HAVE NOT MOVED.

U.S. POST OFFICE HAS CHANGED OUR MAILING CITY (FM. 'LAKE WORTH' TO 'WELLINGTON', FL) & OUR ZIP CODE (FM. '33467' TO '33449').

Lee Hasselbeck