2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000097152

Entity Name: KRIS OLSON, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 217 BUTLER DR SATSUMA, FL 32189 **Current Mailing Address: New Mailing Address:** 217 BUTLER DR SATSUMA, FL 32189 FEI Number: 65-1149163 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: OLSON, KRISTEN P 217 BUTLER DR. SATSUMA, FL 32189 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition OLSON, KRISTEN Name: Name:

 Title:
 PRES
 () Delete
 Title:
 () Change () Addition

 Name:
 OLSON, KRISTEN
 Name:

 Address:
 217 BUTLER DR.
 Address:

 City-St-Zip:
 SATSUMA, FL 32189
 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: KRISTEN P OLSON PRES 04/23/2009