

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 478062

FILED
Jan 12, 2009
Secretary of State

Entity Name: HARLIE LYNCH CONSTRUCTION CO., INC.

Current Principal Place of Business:

306 S.W. CR 300
MAYO, FL 32066

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 187
MAYO, FL 32066 US

New Mailing Address:

FEI Number: 59-1611071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCH, HARLIE A
SR 251 A WEST
MAYO, FL 32066 US

Name and Address of New Registered Agent:

LYNCH, HARLIE A
306 SW CR. 300
MAYO, FL 32066 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:

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: LYNCH, PAMELA D
Address: SR 251 A WEST
City-St-Zip: MAYO, FL 32066

Title: PD () Delete
Name: LYNCH, HARLIE A,
Address: RT 1 6251 A WEST
City-St-Zip: MAYO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: LYNCH, PAMELA D
Address: 306 SW CR. 300
City-St-Zip: MAYO, FL 32066 US

Title: PD (X) Change () Addition
Name: LYNCH, HARLIE A,
Address: 306 SW CR 300
City-St-Zip: MAYO, FL 32066 US

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: HARLIE A. LYNCH

PD

01/12/2009

Electronic Signature of Signing Officer or Director

Date