2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 494729

Entity Name: LEHN MGMT. CORP.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1351 S UNIVERSITY DR PLANTATION, FL 33317 US

Current Mailing Address: New Mailing Address:

1351 S UNIVERSITY DR 331 NW 131 AVE

PLANTATION, FL 33317 US PLANTATION, FL 33325 US

FEI Number: 59-1707786 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:

LEHN, DONALD G 231 NW 127 AVE PLANTATION, FL 33325 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: PD () Delete Title: PD (X) Change () Addition Name: LEHN, DONALD GREGORY Name: LEHN, DONALD G PD Address: 231 N.W. 127 AVENUE Address: 231 N.W. 127 AVENUE

City-St-Zip: PLANTATION FL, City-St-Zip: PLANTATION, FL 33325 US

Title: D () Delete Title: D (X) Change () Addition Name: LEHN. BETH D D

 Address:
 231 N.W. 127 AVENUE
 Address:
 231 N.W. 127 AVENUE

 City-St-Zip:
 PLANTATION FL,
 City-St-Zip:
 PLANTATION, FL 33325 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 LEHN, KIM
 Name:
 LEHN, KIM D

 Address:
 6921 NW 12TH ST.
 Address:
 6921 NW 12TH ST.

 City-St-Zip:
 PLANTATION, FL
 City-St-Zip:
 PLANTATION, FL 33325 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: DONALD G LEHN PD 04/20/2009