2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001677

Entity Name: LYNN CARLSON LTD., INC.

FILED Feb 23, 2009 Secretary of State

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

505 BEACHLAND BLVD., SUITE 1 2336 57TH CIRCLE

VERO BEACH, FL 32966 #249 VERO BEACH, FL 32963

New Mailing Address: Current Mailing Address:

505 BEACHLAND BLVD., SUITE 1 P.O. BOX 7319

249 VERO BEACH, FL 32961

VERO BEACH, FL 32963

FEI Number: 36-4206580 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:

CARLSON, LYNN CARLSON, LYNN 505 BEACHLAND BLVD., SUITE 1 2336 57TH CIRCLE

VERO BEACH, FL 32966 US # 249 VERO BEACH, FL 32963 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: 02/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

CARLSON, LYNN CARLSON, LYNN Name: Name: P.O. BOX 7319 505 BEACHLAND BLVD., SUITE 1, #249 Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32961

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.

Ρ SIGNATURE: LYNN CARLSON 02/23/2009