

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001186

Entity Name: LINN PRODUCTS INC.

FILED  
Feb 10, 2007  
Secretary of State

## Current Principal Place of Business:

8787 PERIMETER PARK BLVD  
JACKSONVILLE, FL 32216 US

## New Principal Place of Business:

## Current Mailing Address:

8787 PERIMETER PARK BLVD  
JACKSONVILLE, FL 32216 US

## New Mailing Address:

FEI Number: 22-3501615      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CARROLL, STEVE  
8787 PERIMETER PARK BLVD.  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: MURPHY, PETER  
Address: 17 SMEATON DR  
City-St-Zip: GLASGOW, UK G64 3BF

Title: VP ( ) Delete  
Name: CARROLL, STEVE  
Address: 3505 WEST AMANDA COURT  
City-St-Zip: JACKSONVILLE, FL 32259

Title: S ( ) Delete  
Name: KERR, MARGARET  
Address: 171 FARNE DRIVE  
City-St-Zip: GLASGOW, UK G44 5DN

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition  
Name: MURPHY, PETER  
Address: 17 SMEATON DR  
City-St-Zip: GLASGOW, UK G64 3BF

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MR ( ) Change (X) Addition  
Name: PEARSON, LANCE  
Address: 139 NEWELL AVENUE  
City-St-Zip: LOS GATOS, CA 95032 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN MCKINNON

MR

02/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date