2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT FILED Jan 28, 2008 08:00 AM **DOCUMENT # G58830** 1. Entity Name **Secretary of State** RICH-LYN, INC. Principal Place of Business Mailing Address C/O CAROLYN W. SPALDING C/O CAROLYN W. SPALDING 940 RICHLAND AVE. 940 RICHLAND AVE. MERRITT ISLAND, FL 32953 MERRITT ISLAND, FL 32953 CR2E034 (11/05) 01082008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2343244 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent SPALDING, CAROLYN W. DO NOT WRITE 940 RICHLAND AVE. MERRITT ISLAND, FL 32953 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DD F SPALDING, CAROLYN W NAME STREET ADDRESS 940 RICHLAND AVE MERRITT ISLAND, FL 00000, CITY-ST-ZIP U00000801790 02/01/08-80034-004 150.00 TITLE NAME SPALDING, RICHARD M STREET ADDRESS 940 RICHLAND AVE CITY-ST-ZIP MERRITT ISLAND, FL 00000. TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICNIATI IDE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Carolin w. Spala

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