2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H49975

Entity Name: TRYCON, INC.

FILED Mar 31, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

951 MARKET PROMENADE AVE 1431 ORANGE CAMP ROAD

SUITE 2105 SUITE 116

LAKE MARY, FL 32746 DELAND, FL 32724

Current Mailing Address: New Mailing Address:

951 MARKET PROMENADE AVE P.O. BOX 953544

SUITE 2105 LAKE MARY, FL 327953544 US LAKE MARY, FL 32746 US

FEI Number: 59-2576681 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:

PHELPS, SPENCER PHELPS, SPENCER 1431 ORANGE CAMP ROAD 951 MARKET PROMENADE AVE **SUITE 2105** SUITE 116

LAKE MARY, FL 32746 US DELAND, FL 32724 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: SPENCER PHELPS 03/31/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Title: PHELPS, SPENCER, PHELPS, SPENCER, Name: Name:

951 MARKET PROMENADE AVE., SUITE 2105 Address: 11431 ORANGE CAMP ROAD, SUITE 116 Address:

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: DELAND, FL 32724 US

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

CANNON, FRANK J., Name: Name: CANNON, FRANK J.,

951 MARKET PROMENADE AVE., SUITE 2105 Address: 11431 ORANGE CAMP ROAD, SUITE 116 Address:

City-St-Zip: LAKE MARY, FL 32746 DELAND, FL 32724 US City-St-Zip:

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: FRANK J CANNON 03/31/2009 D

Electronic Signature of Signing Officer or Director

Date