

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000024921

Entity Name: RICLYN, CORP.

FILED  
Apr 20, 2005  
Secretary of State

## Current Principal Place of Business:

219 AZALEA ST.  
TAVERNIER, FL 33070 US

## New Principal Place of Business:

## Current Mailing Address:

219 AZALEA ST.  
TAVERNIER, FL 33070 US

## New Mailing Address:

P. O. BOX 555  
TAVERNIER, FL 33070 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOLDMAN, DAVID E  
20700 WEST DIXIE HIGHWAY  
NORTH MIAMI BEACH, FL 33180 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: P ( ) Delete  
Name: CARLSON, RICHARD  
Address: 5031 S.W. 188 AVE.  
City-St-Zip: SOUTHWEST RANCHES, FL 33332 US

Title: S ( ) Delete  
Name: CARLSON, LYNNE  
Address: 5031 S.W. 188 AVE.  
City-St-Zip: SOUTHWEST RANCHES, FL 33332 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CARLSON, RICHARD  
Address: 219 AZALEA ST.  
City-St-Zip: TAVERNIER, FL 33070 US

Title: S (X) Change ( ) Addition  
Name: CARLSON, LYNNE  
Address: 219 AZALEA ST.  
City-St-Zip: TAVERNIER, FL 33070 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LYNNE CARLSON

S

04/20/2005

Electronic Signature of Signing Officer or Director

Date