

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067082

Entity Name: LYON ENTERPRISES, INC.

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

13340 HUDSON AVENUE
HUDSON, FL 34669 US

New Principal Place of Business:

Current Mailing Address:

13340 HUDSON AVENUE
HUDSON, FL 34669 US

New Mailing Address:

FEI Number: 20-1061479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRENCE, ALFRED W JR
6645 RIDGE ROAD
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

TORRENCE, ALFRED W JR
6709 RIDGE ROAD
SUITE 106
PORT RICHEY, FL 34668 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:

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LYON, JACK L
Address: 13340 HUDSON AVENUE
City-St-Zip: HUDSON, FL 34669 US

Title: D () Delete
Name: LYON, MARCIA L
Address: 13340 HUDSON AVENUE
City-St-Zip: HUDSON, FL 34669 US

Title: DPST () Delete
Name: LYON, MARK
Address: 13340 HUDSON AVENUE
City-St-Zip: HUDSON, FL 34669 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: LYON, MARK S
Address: 13340 HUDSON AVENUE
City-St-Zip: HUDSON, FL 34669 US

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

Title: D (X) Change () Addition
Name: PROSE, TERESA
Address: 560 EASTLAKEVIEW DR
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: D () Change (X) Addition
Name: OBENREDER, LISA
Address: 8605 WAGON WHEEL LANE
City-St-Zip: HUDSON, FL 34667

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: MARK LYON

DPST

03/20/2009

Electronic Signature of Signing Officer or Director

Date