

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 23, 2008
Secretary of State**

DOCUMENT# P04000080701

Entity Name: LYERLY ENTERPRISES INC.

Current Principal Place of Business:

7620 N GAINER ROAD
SOUTHPORT, FL 32409

New Principal Place of Business:

Current Mailing Address:

7620 N GAINER ROAD
SOUTHPORT, FL 32409

New Mailing Address:

FEI Number: 20-1151740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYERLY, DAVID
7620 N GAINER ROAD
SOUTHPORT, FL 32409 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LYERLY, DAVID
Address: 7620 N GAINER ROAD
City-St-Zip: SOUTHPORT, FL 32409 US

Title: VP () Delete
Name: SAPP, PAMELA J
Address: 7620 N GAINER ROAD
City-St-Zip: SOUTHPORT, FL 32409 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S () Change (X) Addition
Name: CLARK, KEVIN C S
Address: 7620 NORTH GAINER BY RD
City-St-Zip: SOUTHPORT, FL 32409

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: PAMELA J SAPP

VP

10/23/2008

Electronic Signature of Signing Officer or Director

Date