2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071028

Address:

City-St-Zip:

1700 NW 66 AVE 102

FORT LAUDERDALE, FL 33313

Entity Name: LYRA MANAGEMENT, INC.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1700 NW 66TH AVE STE 102 FORT LAUDERDALE, FL 33313 **Current Mailing Address: New Mailing Address:** 888 SE 3RD AVENUE STE 501 FORT LAUDERDALE, FL 33316 FEI Number: 20-2843737 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: FORMAN, M. AUSTIN 888 SE 3RD AVENUE STE 501 FORT LAUDERDALE, FL 33316 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition KUCZYNSKI, RON W Name: Name: 888 SE 3RD AVENUE, STE 501 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: Title: VPD Title: () Delete () Change () Addition Name: FORMAN, M. AUSTIN Name: 888 SE 3RD AVENUE, STE 501 Address: Address: FORT LAUDERDALE, FL 33316 City-St-Zip: City-St-Zip: () Delete Title: Title: TD () Change () Addition MURPHY, WILLIAM M Name: Name: 1700 NW 66 AVE 102 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33313 City-St-Zip: Title: SD () Delete Title: () Change () Addition GETTLER, BENJAMIN Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: M AUSTIN FORMAN D 05/02/2007