

**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 21, 2009  
Secretary of State**

DOCUMENT# P07000103985

Entity Name: OLIN ENTERPRISES, INC.

**Current Principal Place of Business:**

390 TEQUESTA DRIVE SUITE H  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

390 TEQUESTA DRIVE SUITE H  
TEQUESTA, FL 33469

**New Mailing Address:**

FEI Number: 56-2676531      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BROWNE, PAMELA  
390 TEQUESTA DRIVE SUITE H  
TEQUESTA, FL 33469 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: D ( ) Delete  
Name: BROWNE, OLIN  
Address: 390 TEQUESTA DRIVE SUITE H  
City-St-Zip: TEQUESTA, FL 33469

Title: D ( ) Delete  
Name: BROWNE, PAMELA  
Address: 390 TEQUESTA DRIVE SUITE H  
City-St-Zip: TEQUESTA, FL 33469

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: PAMELA BROWNE

D

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date