

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000075328

FILED  
Feb 27, 2008  
Secretary of State

Entity Name: LYONS HERITAGE CORP.

**Current Principal Place of Business:**

9240 MARKETPLACE ROAD  
SUITE 1  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

9240 MARKETPLACE ROAD  
SUITE 1  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 65-0525881      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LYONS, BOBBY  
9240 MARKETPLACE ROAD  
FORT MYERS, FL 33912      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: LYONS, BOBBY R  
Address: 9240 MARKETPLACE ROAD  
City-St-Zip: FORT MYERS, FL 33912

Title: MGMR (X) Delete  
Name: LYONS HOLDING INC,  
Address: 9240 MARKET PLACE ROAD  
City-St-Zip: FORT MYERS, FL 33912

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

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

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: VP ( ) Change (X) Addition  
Name: LYONS, NORMA L  
Address: 9240 MARKETPLACE ROAD  
City-St-Zip: FORT MYERS, FL 33912

Title: VP ( ) Change (X) Addition  
Name: GARTON, LORI  
Address: 9240 MARKETPLACE ROAD  
City-St-Zip: FORT MYERS, FL 33907

Title: VP ( ) Change (X) Addition  
Name: HAMMOND, CHRIS  
Address: 9240 MARKETPLACE ROAD  
City-St-Zip: FORT MYERS, FL 33912

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: CHRIS HAMMOND

VP

02/27/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date