2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103225

Entity Name: USLAN CORP

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 777 S. ST. RD. 7 #506 MARGATE, FL 33068 **New Mailing Address: Current Mailing Address:** 777 S. ST. RD. 7 #506 MARGATE, FL 33068 FEI Number: 65-0961725 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: HALL, GARY A HALL, GARY A 777 S. ST. ROAD 7. #506 777 S. ST. ROAD 7 MARGATE, FL 33068 #506 MARGATE, FL 33068 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: 03/24/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD () Delete Title: (X) Change () Addition HALL, GARY Name: Name: HALL, GARY A 777 SOUTH STREET ROAD 7 #506 777 SOUTH STREET ROAD 7 #506 Address: Address: City-St-Zip: POMPANO BEACH, FL 33068 City-St-Zip: MARGATE, FL 33068 Title: SD () Delete Title: SD (X) Change () Addition Name: HALL, CHRISTINE Name: HALL, CHRISTINE M 777 SOUTH STREET ROAD 7 #506 777 SOUTH STREET ROAD 7 #506 Address: Address: POMPANO BEACH, FL 33068 MARGATE, FL 33068 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PATTEN, LOU Name: Name: 777 S. ST. RD. 7 #506 Address: Address: City-St-Zip: MARGATE, FL 33068 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: GARY A. HALL PD 03/24/2009