

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 24, 2008  
Secretary of State**

DOCUMENT# P96000033197

Entity Name: LYNN R. PRICE, INC.

**Current Principal Place of Business:**

C/O AMY L. PRICE AUW, A/K/A AMY L. AUW  
691 W SYCAMORE ST  
VERNON, IL 60061

**New Principal Place of Business:**

C/O AMY L. PRICE AUW, A/K/A AMY L. AUW  
691 W SYCAMORE ST  
VERNON HILLS, IL 60061

**Current Mailing Address:**

C/O AMY L. PRICE AUW, A/K/A AMY L. AUW  
691 W SYCAMORE ST  
VERNON, IL 60061

**New Mailing Address:**

C/O AMY L. PRICE AUW, A/K/A AMY L. AUW  
691 W SYCAMORE ST  
VERNON HILLS, IL 60061

FEI Number: 59-3373753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PRICE, LYNN R  
696 E. EAU GALLIE BLVD.  
INDIAN HARBOUR BEACH, FL 32937      US

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

ANDERSON, J. PATRICK  
930 S. HARBOR CITY BOULEVARD  
SUITE 505  
MELBOURNE, FL 32901 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: /J. PATRICK ANDERSON/      07/24/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title:            D/P            ( ) Delete  
Name:           PRICE, LYNN R  
Address:        1385 HWY A1A UNIT 205  
City-St-Zip:    SATELLITE BEACH, FL 32937

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

Title:            DPST            (X) Change ( ) Addition  
Name:           AUW, AMY L  
Address:        691 W SYCAMORE ST  
City-St-Zip:    VERNON HILLS, IL 60061

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: /AMY L. AUW A/K/A AMY L. PRICE AUW/      PRES      07/24/2008  
Electronic Signature of Signing Officer or Director      Date