

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J54339

FILED  
Apr 10, 2006  
Secretary of State

Entity Name: FREEPORT LEASING OF FLORIDA CORP.

**Current Principal Place of Business:**

% PHILIP M. WARREN  
3350 E ATLANTIC BLVD.  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

% PHILIP M. WARREN  
3350 E ATLANTIC BLVD.  
POMPANO BEACH, FL 33062

**New Mailing Address:**

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

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

WARREN, PHILIP M.  
3350 E ATLANTIC BLVD  
POMPANO BEACH, FL 33062      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:                      HENRY, RICHARD W.,  
Address:                      106 FITZWILLIAM BLVD.  
City-St-Zip:                      LONDON ONTARIO N6H 5H4, ON N6H 5H4 CA

Title:                      D                      ( ) Delete  
Name:                      HENRY, SHIRLEY J.,  
Address:                      106 FITZWILLIAM BLVD.  
City-St-Zip:                      LONDON ONTARIO N6H 5H4, ON

Title:                      ST                      ( ) Delete  
Name:                      HENRY, SHIRLEY J.,  
Address:                      106 FITZWILLIAM BLVD.  
City-St-Zip:                      LONDON ONTARIO N6H 5H4, ON

Title:                      VP                      ( ) Delete  
Name:                      HENRY, RONALD,  
Address:                      106 FITZWILLIAM BLVD.  
City-St-Zip:                      LONDON ONTARIO N6H 5H4, ON

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

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

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

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 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: RICHARD W. HENRY

PRES

04/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date