

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000046092

Entity Name: DONNER LE TON, INC.

FILED
Apr 10, 2005
Secretary of State

Current Principal Place of Business:

3750 US 1 SOUTH
ST AUGUSTINE, FL 32086

New Principal Place of Business:

4420 US 1 SOUTH
SUITE 4 & 5
ST AUGUSTINE, FL 32086

Current Mailing Address:

3750 US 1 SOUTH
ST AUGUSTINE, FL 32086

New Mailing Address:

4208 WICKS LANE
ST AUGUSTINE, FL 32086

FEI Number: 59-3193964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASHMIRY-LOHR, LEILA
3750 U.S. 1 SOUTH
ST. AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

KASHMIRY-LOHR, LEILA
4420 U.S.1 SOUTH
4 & 5
ST. AUGUSTINE, FL 32086 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: _____

Electronic Signature of Registered Agent

04/10/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KASHMIRY-LOHR, LEILA
Address: 3750 US ONE SOUTH
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KASHMIRY-LOHR, LEILA
Address: 4420 US ONE SOUTH, SUITE 4
City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEILA KASHMIRY-LOHR

PRES

04/10/2005

Electronic Signature of Signing Officer or Director

Date