FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000036503 (7)**

1. Corporation Name

LEA INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
46 NO. WASHINGTON BLVD. STE. 1 SARASOTA FL 34236	46 NO. WASHINGTON BLVD. STE. 1 SARASOTA FL 34236

2. Principal Place of Business (21): **6520 HARNEY ROAD**	2a. Mailing Address (26):
Suite, Apt. #, etc. (22):	Suite, Apt. #, etc. (27):
City & State (23): **TAMPA FL**	City & State (28):
Zip (24): **33610** Country (25):	Zip (29): Country (30):

3. Date Incorporated or Qualified: **05/04/1995**

3a. Date of Last Report: **N/A**

4. FEI Number: **59-3320431** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PATTERSON, JOHN PAT
46 NO. WASHINGTON BLVD. STE. 1
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (Required) (Title, if Registered Agent is an entity (Required when applicable)) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PATTERSON, JOHN 46 NO. WASHINGTON BLVD. STE. 1 SARASOTA FL 34236	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D,P,T GRAU, JAMES 6520 HARNEY ROAD TAMPA FL 33610	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D,1st VP, S PENNINGTON, GERALD L. 6520 HARNEY ROAD TAMPA FL 33610	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D,2nd VP PENNINGTON, MARGARET 6520 HARNEY ROAD TAMPA FL 33610	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	3rd VP KING, MARK 6520 HARNEY ROAD TAMPA FL 33610	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	PLEASE SIGN & DATE	☐ Change ☑ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James Grau Feb. 26 1996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

JAMES GRAU, President

(813) 621-1324
Daytime Phone #

CR2E034 (12/95)