## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 354134**

Title:

Name:

Address:

City-St-Zip:

FILED Jan 16, 2008 Secretary of State

Entity Nan	ie: PERRY&L	EIGHTY INVESTMENTS, INC	).				
Current Principal Place of Business:			New Principal Place of Business:				
	OKHAM RD NE, FL 32904	US					
Current Mailing Address:			New Mailing Address:				
	CKHAM RD NE, FL 32904	US					
FEI Number:	59-1272881	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certi	ificate of Status Desi	red ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
LEIGHTY, I 6660 FLAM MELBOUR		US					
The above in the State		bmits this statement for the pu	rpose of changing it	ts registered office	or registered agent	t, or both,	
SIGNATUR							
Electronic Signature of Registered Agent			nt		Date		
Election Carr	paign Financing 1	Frust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () D LEIGHTY,DALE T 6660 FLAMINGO MELBOURNE, FL	RD	Title: Name: Address: City-St-Zip:	()Chan	ge ( ) Addition		
Title: Name: Address: City-St-Zip:	V () D PERRY,DILLARD 8371 SYLVAN DR MELBOURNE, FL	R, NVE	Title: Name: Address: City-St-Zip:	V (X) Chan PERRY,DILLARD R, 8371 SYLVAN DRIVE MELBOURNE, FL 32	ge ( ) Addition		
Title: Name: Address: City-St-Zip:	S () D PERRY,EDITH, 8371 SYLVAN DR MELBOURNE, FL		Title: Name: Address: City-St-Zip:	S (X) Chan PERRY,EDITH, 8371 SYLVAN DRIVE MELBOURNE, FL 32			

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DALE LEIGHTY Ρ 01/16/2008

() Delete

LEIGHTY, SARAH A,

6660 FLAMINGO RD

MELBOURNE, FL

(X) Change ( ) Addition

LEIGHTY, SARAH A,

6660 FLAMINGO RD

MELBOURNE, FL 32904