
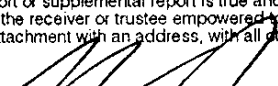


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90416 019 ***150.00

DOCUMENT # 357710 1. Entity Name LEACH ASSOCIATES, INC.					
Principal Place of Business 320 OLD MAIN ST. P.O. BOX 1700 BRADENTON FLA, 34206 US			Mailing Address 200 SOUTH ORANGE AVE SARASOTA, FL 34236 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1306907	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GREBE, JEFFREY A 200 SOUTH ORANGE AVE SARASOTA, FL 34236				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTVS LEACH, ALBERT K J JR 5013 BAYSHORE ROAD SARASOTA, FL 34234 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4/25/06		
ALBERT K. LEACH, JR., Its President			Date _____ Daytime Phone # _____		

WILLIAMSPARKER
HARRISON DIETZ & GETZEN

ATTACHMENT

40076508
357710

ATTORNEYS AT LAW
200 SOUTH ORANGE AVENUE
SARASOTA, FLORIDA 34236
T: (941) 552-5550
F: (941) 552-5559
soneil@williamsparker.com

April 26, 2006

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

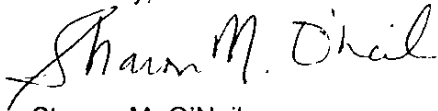
Re: LEACH ASSOCIATES, INC.

Dear Sir/Madam:

Forwarded herewith is the 2006 Uniform Business Report for Leach Associates, Inc., and our Firm's check in the amount of \$150.00, in payment of the filing fee. Please file this report as quickly as possible.

Thank you, and please contact me immediately should any problems arise in connection with this filing.

Sincerely,



Sharon M. O'Neil
Corporate Paralegal

sno-694669
Enclosures