

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 419626

FILED
Dec 07, 2009
Secretary of State**Entity Name:** LEAH-CHEM INDUSTRIES INC**Current Principal Place of Business:**6725 ALAZAN AVE
COCOA, FL 32927 US**New Principal Place of Business:****Current Mailing Address:**6725 ALAZAN AVE
COCOA, FL 32927 US**New Mailing Address:****FEI Number:** 59-1438145**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEINHAUSER, Nanci A
6725 ALAZAN AVE
COCOA, FL 32927 US**Name and Address of New Registered Agent:**LEINHAUSER, Nanci D
6725 ALAZAN AVE
COCOA, FL 32927 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: Nanci D. LEINHAUSER

12/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PDOT () Delete
Name: LEINHAUSER, Nanci A
Address: 6725 ALAZAN AVE
City-St-Zip: COCOA, FL 32927**Title:** V (X) Delete
Name: DEGARMO, WAYNE H
Address: 620 MARGIE DR
City-St-Zip: TITUSVILLE, FL 32780**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PDTS (X) Change () Addition
Name: LEINHAUSER, Nanci D
Address: 6725 ALAZAN AVE
City-St-Zip: COCOA, FL 32927**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: Nanci D. LEINHAUSER

PDTS

12/07/2009

Electronic Signature of Signing Officer or Director

Date