2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 07, 2005 08:00 AM

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DOCU 1. Entity Nan LEETCO	MENT # 487020 , inc.				Seci	etary of S	tate
6028 21ST		Mailing Address P. O. BOX 1201 TALLEVAST, FL 34270 US					
כ	OO NOT WRITE I	CE	063020054. FEI Numb 59-1635. Certificate		·	plied For Applicable	
	6. Name and Address of Current Reg	etovad Agent	····	L		· · · rea nequired	·
TEEL, PAI 20605 63F BRADENT	UL L.	stered Agent			NOT W		
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							
	LE NOW!!! FEE IS \$150,00 ue by September 7, 2005	cing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10.	OFFICERS AND DIRE	CTORS	T .				
TITLE NAME STREET ADDRESS CITY_ST-ZIP	PD TEEL, PAUL L PO BOX 618 TALLEVAST, FL 34270				A TO SERVICE	Bigs and Constraints of the Constraints	
TITLE NAME STREET ADDRESS	VD SUDBURY, DONALD E. 20807 63RD AVE E	-	and process a form	**		## ***	استنب بداد
CHY-S1-2IP	BRADENTON, FL 34202 ST	<u> </u>			000000 07/07/05-	371242 80009-017 15	0.00
NAME STREET ADDRESS CITY-ST-ZIP	RUSSELL, MARY R. 2612 47TH AVE. W. BRADENTON, FL			DO	NOT W	RITE	į
TITLE NAME	DIVIDENTOR, 12				THIS SP		
STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							
CITY - ST- ZIP			- New / - 				
TITLE NAME							
STREET ADDRESS	2.8		•				

12. Thereby certify that the information supplied with this filling does not qualify 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 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:

Hary R. Russell, MARY R RUSSELL SIGNATURE HID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/05

941-158-8558